

FILE NOTATIONS

Entered in NID File ...✓/....
Location Map Pinned/....
Card Indexed✓/.....

Checked by Chief
Approval Letter
Disapproval Letter

COMPLETION DATA:

Site Well Completed 2/2/80

Location Inspected ..

✓/... WW..... TA.....

Bond released

✓/... OS..... PA.....

State or Fee Land

LOGS FILED

Driller's Log.....

Electric Logs (No.)

E..... I..... Dual I Lat..... GR-M..... Micro.....

BHC Sonic GR..... Lat..... MI-L..... Sonic.....

CBLog..... CCLog..... Others.....

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL & GASML 22265
6. Lease Designation and Serial No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. Type of Well

Oil
Well ☒Gas
Well ☐Other ☐Single
Zone ☒Multiple
Zone ☐

2. Name of Operator

Gulf Oil Corporation

3. Address of Operator

Box 2619 Casper, Wyoming 82602

4. Location of Well (Report location clearly and in accordance with any State requirements.)*

At surface

2215' FNL & 1876' FWL

At proposed prod. zone same

14. Distance in miles and direction from nearest town or post office*

15. Distance from proposed*
location to nearest
property or lease line, ft.
(Also to nearest drlg. line, if any)

1876'

16. No. of acres in lease

639

17. No. of acres assigned
to this well

639

18. Distance from proposed location*
to nearest well, drilling, completed,
or applied for, on this lease, ft.

none

19. Proposed depth

9320'

20. Rotary or cable tools

rotary

21. Elevations (Show whether DF, RT, GR, etc.)

5006' GR

22. Approx. date work will start*

7-30-79

23.

PROPOSED CASING AND CEMENTING PROGRAM

Size of Hole	Size of Casing	Weight per Foot	Setting Depth	Quantity of Cement
12 1/4"	9 5/8"	36	2500'	900 sx
8 3/4"	5 1/2"	17	9320'	1200 sx



IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

Signed G. L. WilliamsTitle Drilling SuperintendentDate 7-10-79

(This space for Federal or State office use)

Permit No. _____ Approval Date _____

Approved by _____ Title _____ Date _____

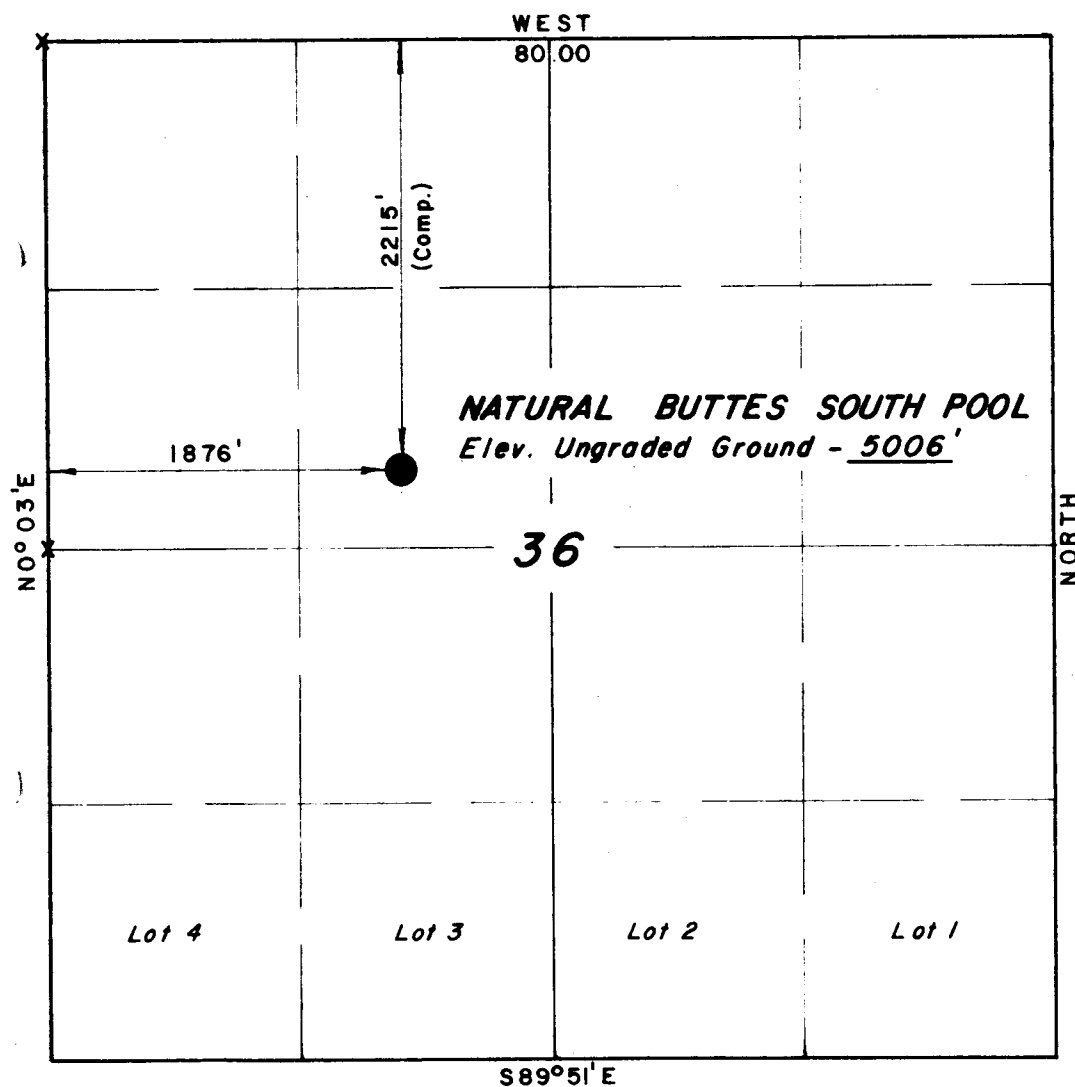
Conditions of approval, if any:

T 9 S , R 21 E , S. L. B. & M.

PROJECT

GULF OIL CORPORATION

Well location, **NATURAL BUTTES SOUTH POOL**, located as shown in the SE 1/4 NW 1/4 Section 36, T9S, R21E, S.L.B. & M. Uintah County, Utah



X = Section Corners Located



CERTIFICATE

THIS IS TO CERTIFY THAT THE ABOVE PLAT WAS PREPARED FROM FIELD NOTES OF ACTUAL SURVEYS MADE BY ME OR UNDER MY SUPERVISION AND THAT THE SAME ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF

[Signature]
REGISTERED LAND SURVEYOR
REGISTRATION NO 3154
STATE OF UTAH

UINTAH ENGINEERING & LAND SURVEYING
P.O. BOX Q - 110 EAST - FIRST SOUTH
VERNAL, UTAH - 84078

SCALE	1" = 1000'	DATE	7 / 2 / 79
PARTY	DA BW KC RP	REFERENCES	GLO Plat
WEATHER	Clear / Hot	FILE	GULF OIL

GULF OIL CORP.

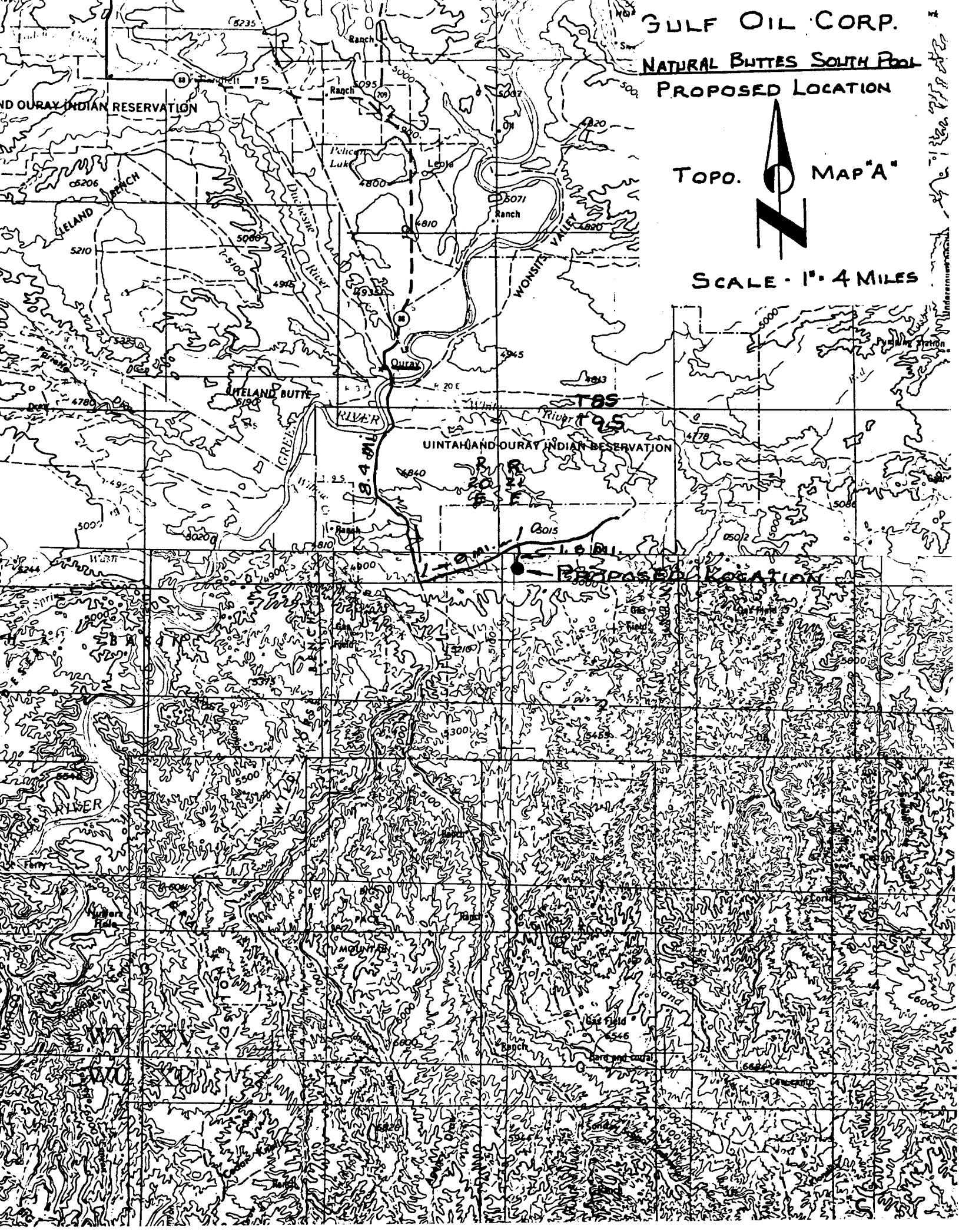
NATURAL BUTTES SOUTH POOL

PROPOSED LOCATION

TOPO.

MAP "A"

SCALE - 1" = 4 MILES



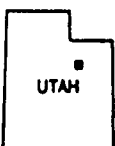


TOPO. MAP "B"

SCALE - 1" = 2000'

ROAD CLASSIFICATION

Heavy-duty _____ Light-duty _____
Medium-duty _____ Unimproved dirt _____
U.S. Route State Route

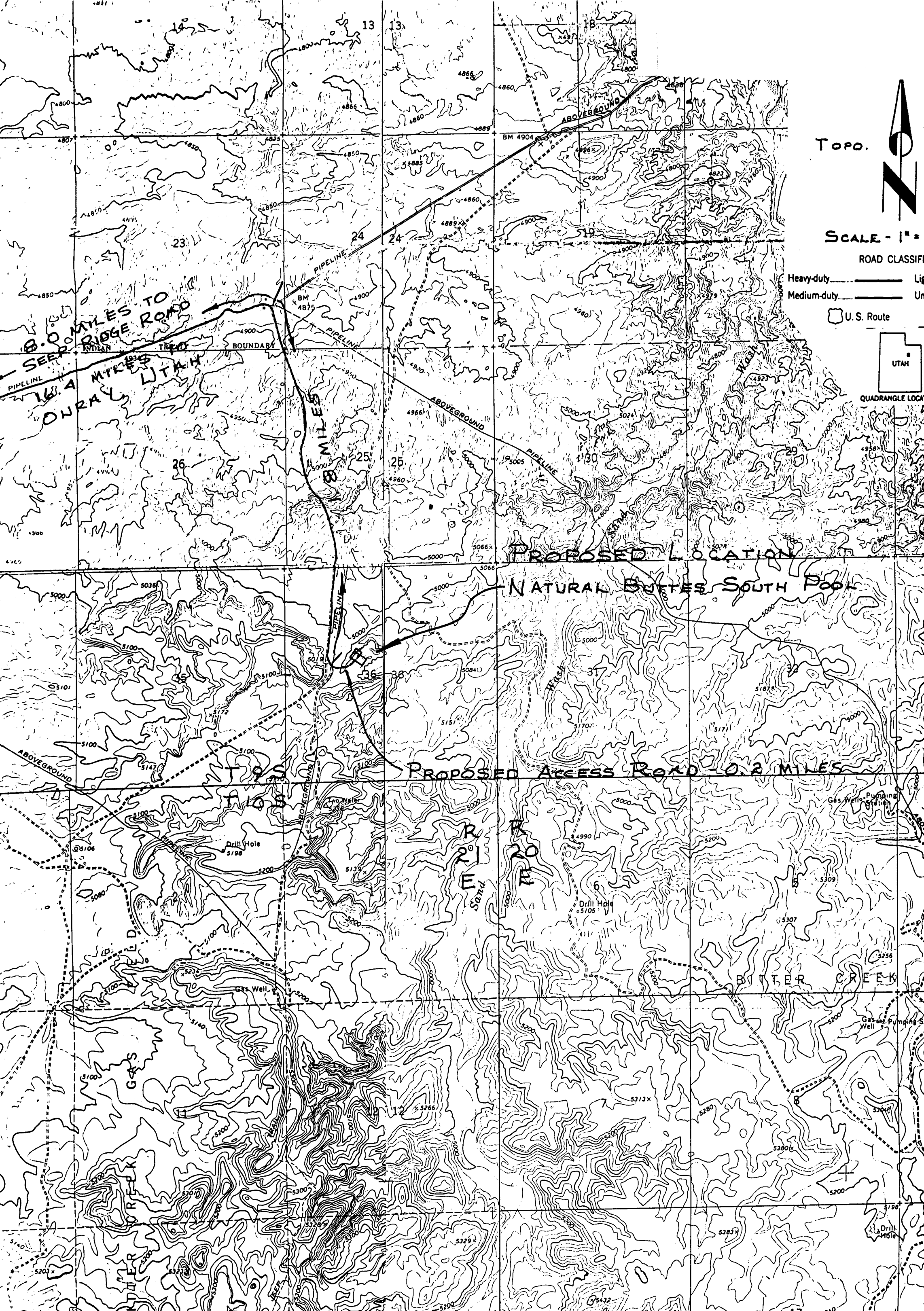


QUADRANGLE LOCATION

PROPOSED LOCATION
NATURAL BUTTES SOUTH POOL

PROPOSED ACCESS ROAD - 0.2 MILES

BITTER CREEK GAS FIELD



STATE OF UTAH
DIVISION OF OIL, GAS, AND MINING

** FILE NOTATIONS **

Date: July 16, 1979

Operator: Gulf Oil Corporation

Well No: Morgan State 1-36

Location: Sec. 36 T. 9S R. 21E County: Uintah

File Prepared: ☒

Entered on N.I.D.: ☒

Card Indexed: ☒

Completion Sheet: ☒

API Number: 43-047-30600

CHECKED BY:

Administrative Assistant: _____

Remarks:

Petroleum Engineer: M.J. Minden 7-30-79

Remarks: Unorthodox Location C-3

Director: [Signature]

Remarks: _____

INCLUDE WITHIN APPROVAL LETTER:

Bond Required: ☐

Survey Plat Required: ☐

Order No. _____

Surface Casing Change ☐
to _____

Rule C-3(c), Topographic exception/company owns or controls acreage
within a 660' radius of proposed site ☐

O.K. Rule C-3 ☐

O.K. In _____ Unit

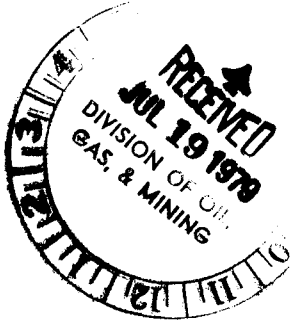
Other: _____

☐ Letter Written/Approved

Gulf Oil Exploration and Production Company

J. L. Goolsby
PRODUCTION MANAGER, CASPER AREA

P. O. Box 2619
Casper, WY 82602



July 17, 1979

Division of Oil, Gas, & Mining
1588 West, North Temple
Salt Lake City, Utah 84116
Attn: Mr. Mike Mendor

Dear Mr. Mendor:

Pursuant to a telephone conversation between yourself and Jerry Croft of this office, this letter confirms Gulf Oil Exploration and Production Company's ownership of oil and gas leases under all of Section 36, T9S, R21E, Uinta County, Utah.

An application for permit to drill the Morgan State 1-36 2215' FNL and 1876' FWL in the above section was filed July 10, 1979. This location conflicts with the spacing requirement of 500' from a 1/4, 1/4 section line. A topographic exception is therefore sought. Pursuant to such exception Gulf does own all oil and gas leases within a 660' radius of the proposed location.

Very truly yours,

A handwritten signature in cursive script, appearing to read 'J. L. Goolsby'.

J. L. Goolsby

JGC/kdd



A DIVISION OF GULF OIL CORPORATION

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL & GASML 22265
5. Lease Designation and Serial No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>			6. If Indian, Allottee or Tribe Name	
b. Type of Well Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Single Zone <input checked="" type="checkbox"/> Multiple Zone <input type="checkbox"/>			7. Unit Agreement Name	
2. Name of Operator Gulf Oil Corporation (8-22750-00)			8. Farm or Lease Name Morgan State	
3. Address of Operator Box 2619 Casper, Wyoming 82602			9. Well No. 1-36	
4. Location of Well (Report location clearly and in accordance with any State requirements.*) At surface 2215' FNL & 1876' FWL At proposed prod. zone same SE NW			10. Field and Pool, or Wildcat Natural Buttes South	
14. Distance in miles and direction from nearest town or post office*			11. Sec., T., R., M., or Bk. and Survey or Area Section 36-T9S-R21E	
15. Distance from proposed* location to nearest property or lease line, ft. (Also to nearest drlg. line, if any) 1876'			12. County or Parrish Uintah	
16. No. of acres in lease 639			13. State Utah	
17. No. of acres assigned to this well 639				
18. Distance from proposed location* to nearest well, drilling, completed, or applied for, on this lease, ft. none			20. Rotary or cable tools Rotary	
19. Proposed depth 9320'			22. Approx. date work will start* 7-30-79	
21. Elevations (Show whether DF, RT, GR, etc.) 5006' GR				
23. PROPOSED CASING AND CEMENTING PROGRAM				
Size of Hole	Size of Casing	Weight per Foot	Setting Depth	Quantity of Cement
12 1/4"	9 5/8"	36	2500'	900 SX
8 3/4"	5 1/2"	17	9320'	1200 SX

(CORRECTED TOWNSHIP: REFER TO APPLICATION FILED 7-10-79)

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

Signed: JA Mathews Title: Area Drilling Supt. Date: 7-23-79

(This space for Federal or State office use)

Permit No. _____ Approval Date _____

Approved by: _____ Title: _____ Date: _____
Conditions of approval, if any:

*See Instructions On Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form 9-329 Rev. Feb 76
OMB 42-RO356

MONTHLY REPORT
OF
OPERATIONS

Lease No. 8-22750-00
AI #43-047-30600
Communitization Agreement No. N/A
Field Name Natural Buttes
Unit Name N/A
Participating Area
County Uintah State Utah
Operator Gulf Oil Corporation

☐ Amended Report

The following is a correct report of operations and production (including status of all unplugged wells) for the month of
JULY, 19 79

(See Reverse of Form for Instructions)

This report is required by law (30 U.S.C. 189, 30 U.S.C. 359, 25 U.S.C. 396 d), regulation (30 CFR 221.60), and the terms of the lease. Failure to report can result in the assessment of liquidated damages (30 CFR 221.54 (j)), shutting down operations, or basis for recommendation to cancel the lease and forfeit the bond (30 CFR 221.53).

Well No.	Sec. & 1/4 of 1/4	TWP	RNG	Well Status	Days Prod.	Barrels of Oil	MCF of Gas	Barrels of Water	Remarks
1-36	SE NW36	9S	21E	DRG			8/1/79	TD 1685'	Prep. to cmt; lost circ zone @ 1585'
							Spudded	12:30 p.m.	7/29/79
DISTRIBUTION:									
3-USGS, CASPER									
2-UTAH OIL & GAS COMMISSION									
1-DeGOLYER & MacNAUGHTON									
1-TAX DEPT									
1-HOUSTON									
1-OC									
1-GP									
2-FILE									
								MORGAN STATE	1-36

*If none, so state.

Disposition of production (Lease, Participating Area, or Communitized Area basis)

	Oil & Condensate (BBLs)	Gas (MCF)	Water (BBLs)
*On hand, Start of Month		XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX
*Produced			
*Sold			XXXXXXXXXXXXXXXXXXXX
*Spilled or Lost		XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX
*Flared or Vented	XXXXXXXXXXXXXXXXXXXX		XXXXXXXXXXXXXXXXXXXX
*Used on Lease			XXXXXXXXXXXXXXXXXXXX
*Injected			
*Surface Pits	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	
*Other (Identify)			
*On hand, End of Month		XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX
*API Gravity/BTU Content			XXXXXXXXXXXXXXXXXXXX

Authorized Signature: Mark L. Wood

Address: P.O. Box 2619 Casper, WY 82601
(307)-235-1311

Title: SENIOR CLERK

NELSON J. MARSHALL
Phone 789-0272

GENE STEWART
Phone 789-1795

LAWRENCE C. KAY
Phone 789-1125

OFFICE LOCATION
85 SOUTH 200 EAST

PHONE 789-1017

Uintah Engineering & Land Surveying

P.O. BOX 9
VERNAL, UTAH 84078



July 19, 1979

Utah State Oil, Gas and Mining Division
1588 West North Temple
Salt Lake City, Utah 84116

Mr. Mike Minder:

As consultant for Gulf Oil Corporation I wish to apply for a topographic exception for Gulf's proposed well in the SE $\frac{1}{4}$ NW $\frac{1}{4}$ Section 36, T9S, R21E, S.L.B. & M. (Morgan State 1-36)

We had to stake the alternate location South and West of the center of the SE $\frac{1}{4}$ NW $\frac{1}{4}$ due to severe cuts in rock ledges, the alternate location is the most feasible spot to build a location in the close vicinity of the center SE $\frac{1}{4}$ NW $\frac{1}{4}$ Section 36.

Respectfully yours,

Gene Stewart
Uintah Engineering and Land Surveying

GS/dcp

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR Gulf Oil Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Box 2619 Casper, Wyoming 82602		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2215' FNL & 1876' FWL		8. FARM OR LEASE NAME Morgan State	
		9. WELL NO. #1-36	
		10. FIELD AND POOL, OR WILDCAT Natural Buttes South	
		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec 36-T4S-R21E	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5006' GR	12. COUNTY OR PARISH Uintah	13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) XXXXXXXX		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

PER CALL@ 2:30 PM ON 7-27-79; VERBAL APPROVAL TO BEGIN DRILLING WELL WAS GIVEN
BY MIKE MINDER.

18. I hereby certify that the foregoing is true and correct

SIGNED Lloyd W. Trautman TITLE Drilling Engineer DATE 7-27-79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:



SCOTT M. MATHESON
Governor

GORDON E. HARMSTON
Executive Director,
NATURAL RESOURCES

CLEON B. FEIGHT
Director

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING
1588 West North Temple
Salt Lake City, Utah 84116
(801) 533-5771

OIL, GAS, AND MINING BOARD

CHARLES R. HENDERSON
Chairman

JOHN L. BELL
C. RAY JUVELIN
THADIS W. BOX
CONSTANCE K. LUNDBERG
EDWARD T. BECK
E. STEELE McINTYRE

August 1, 1979

Gulf Oil Corporation
Box 2619
Casper, Wyoming 82602

Morgan State Corporation
Sec. 36, T. 9S., R. 21E.
Unitah County

Dear Sir:

Insofar as this office is concerned, approval to drill the above referred to well on said unorthodox location is hereby granted in accordance with Rule C-3(c), General Rules and Regulations and Rules of Practice and Procedure.

Should you determine that it will be necessary to plug and abandon this well, you are hereby requested to immediately notify the following:

MICHAEL T. MINDER - Geological Engineer
HOME: 876-3001
OFFICE: 533-5771

Enclosed please find Form OGC-8-X, which is to be completed whether or not water sands (aquifers) are encountered during drilling. Your cooperation in completing this form will be appreciated.

Further, it is requested that this Division be notified within 24 hours after drilling operations commence, and that the drilling contractor and rig number be identified.

The API number assigned to this well is 42-047-30600.

Sincerely,

DIVISION OF OIL, GAS AND MINING

M. T. Minder

MICHAEL T. MINDER
GEOLOGICAL ENGINEER

MTM/tlh

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form 9-329 Rev. Feb 76
OMB 12-RO356

MONTHLY REPORT
OF
OPERATIONS

Lease No. 8-22750-00
A 43-047-30600
Communitization Agreement No. N/A
Field Name Natural Buttes South
Unit Name N/A
Participating Area
County Uintah State Utah
Operator Gulf Oil Corporation

☐ Amended Report

The following is a correct report of operations and production (including status of all unplugged wells) for the month of
August, 1979

(See Reverse of Form for Instructions)

This report is required by law (30 U.S.C. 189, 30 U.S.C. 359, 25 U.S.C. 396 d), regulation (30 CFR 221.60), and the terms of the lease. Failure to report can result in the assessment of liquidated damages (30 CFR 221.54 (j)), shutting down operations, or basis for recommendation to cancel the lease and forfeit the bond (30 CFR 221.53).

Well No.	Sec. & N of N	TWP	RNG	Well Status	Days Prod.	Barrels of Oil	MCF of Gas	Barrels of Water	Remarks
1-36	SE NW36	9S	21E	DRLG			9/1/79	Preparing to acidize.	
								Perf'd 1JHPF 9268-72', 9080-84', 9042-52'.	
								Rig released 2:00 a/m/ 8/21/79	
2-USGS	Slc								
2-Utah	Oil & Gas								
1-DeGo	yer & MacNaughton								
1-OC									
2-File									
								MORGAN STATE 1-36	

*If none, so state.

Disposition of production (Lease, Participating Area, or Communitized Area basis)

	Oil & Condensate (BBLs)	Gas (MCF)	Water (BBLs)
*On hand, Start of Month		XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX
*Produced			
*Sold			XXXXXXXXXXXXXXXXXXXX
*Spilled or Lost		XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX
*Flared or Vented	XXXXXXXXXXXXXXXXXXXX		XXXXXXXXXXXXXXXXXXXX
*Used on Lease			XXXXXXXXXXXXXXXXXXXX
*Injected			
*Surface Pits	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	
*Other (Identify)			
*On hand, End of Month		XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX
*API Gravity/BTU Content		No test	XXXXXXXXXXXXXXXXXXXX

Authorized Signature: Mark L. Wood

Address: P.O. Box 2619 Casper, WY 82601
(307)-235-1311

Title: SENIOR CLERK

SCOTT M. MATHESON
Governor



OIL, GAS, AND MINING BOARD

GORDON E. HARMSTON
Executive Director,
NATURAL RESOURCES

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING
1588 West North Temple
Salt Lake City, Utah 84116
(801) 533-5771

CLEON B. FEIGHT
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JOHN L. BELL
C. RAY JUVELIN
THADIS W. BOX
CONSTANCE K. LUNDBERG
EDWARD T. BECK
E. STEELE MCINTYRE

December 4, 1979

Gulf Oil Corp.
c/o Enviromental Engineering Co.
1720 S. Poplar, Suite # 5
Casper, Wyoming 82601

RE: SEE ATTACHED SHEET FOR
LIST OF WELLS & MONTHS DUE.

Gentlemen:

Our records indicate that you have not filed a Monthly Report of Operations for the months indicated above on the subject well(s).

Rule C-22, General Rules and Regulations and Rules of Praticce and Procedure, requires that said reports be filed on or before the sixteenth (16) day of the succeeding month. Please note, a negative report is also required. This report may be filed on Form OGC-1b, (U.S. Geological Survey Form 9-331) "Sundry Notices and Reports on Wells", or on company forms containing substantially the same information. We are enclosing forms for your convenience.

Your prompt attention to the above will be greatly appreciated.

Very truly yours,

DIVISION OF OIL, GAS, AND MINING

Debbie Beauregard
DEBBIE BEAUREGARD
CLERK-TYPIST

ATTACHMENT SHEET.

- 1) Ute Tribal #1-19
Sec. 19, T. 4S, R. 6W,
Duchesne County, Utah
- 2) Ute Tribal #1-24
Sec. 24, T. 4S, R. 6W,
Duchesne County, Utah
- 3) Ute Tribal #1-30
Sec. 30, T. 4S, R. 6W,
Duchesne County, Utah
- 4) Ute Tribal #1-33
Sec. 33, T. 4S, R. 6W,
Duchesne County, Utah
- 5) Ute Tribal #1-35
Sec. 35, T. 4S, R. 6W,
Duchesne County, Utah
- 6) Nielson Ute #1-22
Sec. 22, T. 5S, R. 6W,
Duchesne County, Utah
- 7) Kaye State #1-16
Sec. 16, T. 10S, R. 23E,
Uintah County, Utah
- 8) Morgan State #1-36
Sec. 36, T. 9S, R. 21E,
Uintah County, Utah

MONTHS DUE

September 1978 thru November 1979
SECOND NOTICE

September 1978 thru November 1979
SECOND NOTICE

September 1978 thru November 1979
SECOND NOTICE

September 1978 thru November 1979
SECOND NOTICE

September 1978 thru November 1979
SECOND NOTICE

September 1978 thru November 1979
SECOND NOTICE

November 1979

September 1978 thru November 1979
SECOND NOTICE

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING
1588 West North Temple
Salt Lake City, Utah 84116

REPORT OF WATER ENCOUNTERED DURING DRILLING

Well Name & Number: Morgan State #1-36

Operator: Gulf Oil Corporation Address: P.O. Box 2619 Casper, WY. 82602

Contractor: R.L. Manning Co. Address: United Bank Center, Suite 2200,
1700 Broadway, Denver, Colo. 80202

Location SE 1/4 NW 1/4; Sec. 36 T. 9 N, R. 21 E; Uintah County.
S W

Water Sands:

	<u>Depth:</u>	<u>Volume:</u>	<u>Quality:</u>
	From- To-	Flow Rate or Head	Fresh or Salty
1.	<u>None</u>		
2.			
3.			
4.			
5.			

(Continue on Reverse Side if Necessary)

Formation Tops: Lower Green River 2780'
Wasatch 4748'
Mesa Verde 6950'

Remarks:

- NOTE: (a) Upon diminishing supply of forms, please inform this office.
(b) Report on this form as provided for in Rule C-20, General Rules and Regulations and Rules of Practice and Procedure.
(c) If a water analysis has been made of the above reported zone, please forward a copy along with this form.

FEB 20 1980

DIVISION OF
OIL, GAS & MINING

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____						5. LEASE DESIGNATION AND SERIAL NO.	
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Gulf Oil Corporation						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 2619 Casper, Wyoming 82602						8. FARM OR LEASE NAME Morgan State	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface (2215' FNL & 1876' FWL) SE NW At top prod. interval reported below Same At total depth Same						9. WELL NO. 1-36	
14. PERMIT NO. -30600 DATE ISSUED						10. FIELD AND POOL, OR WILDCAT Natural Buttes	
15. DATE SPUDDED 7-29-79 16. DATE T.D. REACHED 8-21-79 17. DATE COMPL. (Ready to prod.) 2-2-80 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5006' GL 19. ELEV. CASINGHEAD						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA 36-9S-21E	
20. TOTAL DEPTH, MD & TVD 9531' 21. PLUG, BACK T.D., MD & TVD 9531' 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY → 0-TD 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Mesa Verde Perfs. @ 6962'-9372'						12. COUNTY OR PARISH Uintah 13. STATE Utah	
25. WAS DIRECTIONAL SURVEY MADE No						26. TYPE ELECTRIC AND OTHER LOGS RUN BHC-GR, DLL-GR, FDC-CNL-GR, FDC-CNL, CBL-CL-GR, 2 Base Temp., Temp. 4 Diff.	
27. WAS WELL CORRED No						28. CASING RECORD (Report all strings set in well)	
CASINO SIZE		WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	
13 3/8"			65'				
9 5/8"		36#	2487'		825	None	
5 1/2"		17#	9511'		1840	None	
29. LINER RECORD						30. TUBING RECORD	
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None			----		2 7/8"		
					2 3/8"	6762'	6762'
31. PERFORATION RECORD (Interval, size and number) See Attached Sheet.				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED See Attached Sheet.			
33.* PRODUCTION							
DATE FIRST PRODUCTION 2-2-80		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) SI	
DATE OF TEST 2-2-80	HOURS TESTED 24	CHOKE SIZE 32/64"	PROD'N. FOR TEST PERIOD →	OIL—BBL. 0	GAS—MCF. 870	WATER—BBL. 70	GAS-OIL RATIO 11.5
FLOW. TUBING PRESS. 600#	CASING PRESSURE ----	CALCULATED 24-HOUR RATE →	OIL—BBL. 0	GAS—MCF. 870	WELL HEAD PRESS. (PSI) (CORR.) ---		
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)				TEST WITNESSED BY FEB 25 1980			
35. LIST OF ATTACHMENTS Perforations & Acid Records.							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from available records.							
SIGNED <u>JK Asper</u>		TITLE Area Engineer		DIVISION OF OIL, GAS & MINING DATE February 21, 1980			

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. **Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

Utah Dept. of Natural Resources
Division of Oil, Gas, & Mining
1588 West North Temple
Salt Lake City, Utah 84116

Hotline Energy Reports
P.O. Box 2934
Casper, Wyoming 82602

Petroleum Information Corporation
P.O. Box 2454
Casper, Wyoming 82602

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Mesa Verde	6962'	6982'	Gas Sand	Lower	2780'	
"	7252'	7255'	"	Green River	4748'	
"	7297'	7318'	"	Wasatch	6950'	
"	7442'	7452'	"	Mesa Verde		
"	7480'	7508'	"			
"	7682'	7696'	"			
"	7733'	7738'	"			
"	7894'	7924'	"			

Record Of Perforations, Fractures, Acid, Cement Squeeze, Etc.

Perf. @ 9268'-72', 9080'-84', 9042'-52', w/ 1 JHPF, 1 9/16" gun, 3.5 gram charges, 0° Phasing, total 37 holes.

Acidize w/ 4000 gal. 15% HCL + additives @ Perfs.

Perf. @ 8962'-68', 8884'-90', 8873'-80', 8717'-22', 8612'-18', 8545'-52', w/ 1 JHPF, 1 9/16" gun, 3.5 gram charges, 2° Phasing, total 37 holes.

Acidize--load back side--2% KCL H₂O 1000#, Tst. line to 5000#. Start acid down Tbg., Pump 4000 gal. 15% HCL + additives @ Perfs.

Frac w/ Terra Frac 50 + additives & 2% KCL in all Fl. Attempt to Frac Perfs. 9372'-8545' in two stages. Used 347 Bbls. gel & 2487 H/ 20-40 sd., 220 Bbls. KCL H₂O.

Frac w/ Terra Frac 50 + additives & Frac @ 9372'-8584'. Pumped 500 gal.

15% HCL followed by pad, & a total of 165,200 of 20-40 sd. & 1769 Bbls. H₂O.

Perf. @ 8150'-60', 8218'-24', 8364'-74', w/ 1 JHPF, 1 9/16" gun, 3.5 gram charges, 0° Phasing.

Acidize--Pump 2500 gal. 15% Hcl + additives @ Perfs.

Frac Perfs. 8150'-374' w/ 52,000 gal. Verse-gal & 100,000# 20/40 sd. cont., + additives, Pumped total of 1071 Bbls. Fl & 83,300# 20/40 sd.

Perf. @ 7895'-7900', 7784'-88', 7683'-90', 7480'-90', 7440'-50', 7296'-7304', 7250'-54', 6962'-72', w/ 4 JHPF, 1 9/16" gun, 3.5 gram charges thru. Tbg., total 232 holes.

Acidize & Frac--Killed well w/ Brine water & Frac w/ 116,580 gal. & 240,000# 20-40 sd. in 5 Stages.

<u>Lease Name</u>	<u>Field</u>	<u>Section</u>	<u>Township</u>	<u>Range</u>	<u>County</u>	<u>State</u>
Johnson, Ver1 1-27A2	Bluebell	27	1S	2W	Duchesne	UT
Kaye State 1-16	Natural Buttes	16	10S	23E	Uintah	UT
Lamicq Robertson 1-1B2	Bluebell	27	1S	2W	Duchesne	UT
Lamicq Robertson 2-1B2	Bluebell	1	2S	2W	Duchesne	UT
Lamicq 1-20A2	Bluebell	20	1S	2W	Duchesne	UT
Lamicq-Robrtson/St. 1-1B2	Bluebell	1	2S	2W	Duchesne	UT
Lamicq-Ute 1-5B2	Bluebell	5	2S	2W	Duchesne	UT
Lamicq, John/State 1-6B1	Bluebell	6	2S	1W	Duchesne	UT
Leota 1-34-2B	Undesignated	34	7S	21E	Uintah	UT
Marguerite Ute 1-8B2	Bluebell	8	2S	2W	Duchesne	UT
May Ute Federal 1-13B1	Bluebell	13	2S	1W	Uintah	UT
McElprang Ute 1-31A1	Bluebell	31	1S	1W	Duchesne	UT
Moon Tribal 1-30C4	Altamont	30	3S	4W	Duchesne	UT
Morgan State 1-36	Natural Buttes	36	9S	21E	Uintah	UT *
Mortensen 2-32A2	Bluebell	32	1S	2W	Duchesne	UT
Mortenson 1-32A2	Bluebell	32	1S	2W	Duchesne	UT
Phillips Ute 1-3C5	Altamont	3	3S	5W	Duchesne	UT
Rachel Jensen 1-16C5	Altamont	3	3S	5W	Duchesne	UT
Rachel Jensen 2-16C5	Altamont	16	3S	5W	Duchesne	UT
Reese Estate 1-10B2	Bluebell	10	2S	2W	Duchesne	UT
Robertson Ute St. 1-12B1	Bluebell	12	2S	1W	Duchesne	UT
Robertson Ute 1-2B2	Bluebell	12	2S	1W	Duchesne	UT
Robertson Ute 2-2B2	Bluebell	2	2S	2W	Duchesne	UT
Robertson 1-29A2	Bluebell	29	1S	2W	Duchesne	UT
Saleratus, Wash Ute 1-7C5	Altamont	7	3S	5W	Duchesne	UT
Shrine Hospital 1-10C5	Altamont	10	3S	5W	Duchesne	UT
Smith Broadhead 1-9C5	Altamont	9	3S	5W	Duchesne	UT
Smith-David Ute 1-6C5	Altamont	6	3S	5W	Duchesne	UT
Smith, Albert 1-8C5	Altamont	8	3S	5W	Duchesne	UT
Smith, Albert 2-8C5	Altamont	8	3S	5W	Duchesne	UT
Smith, Joseph 1-17C5	Altamont	17	3S	5W	Duchesne	UT
Smith, Joseph 2-17C5	Altamont	17	3S	5W	Duchesne	UT
Smith, Ute 1-8C5	Altamont	18	3S	5W	Duchesne	UT
Spring Hollow Un/Tr.4-36Z3	Bluebell	36	1N	3W	Duchesne	UT
SpringHollow Un/Tr.2-34Z3	Altamont	34	1N	3W	Duchesne	UT
State Lnd. Bd. Ute 1-35A1	Bluebell	35	1S	1W	Uintah	UT
Taylor, Muriel 1-36A2	Bluebell	36	1S	2W	Duchesne	UT
Todd USA State 1-2B1	Bluebell	2	2S	1W	Uintah	UT

06/27/85
leases gulf operated/file2

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR Gulf Oil Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 2619, Casper, WY 82602		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE of NW Section 36, T9S, R21E, Uintah County, Utah		8. FARM OR LEASE NAME Morgan State	
14. PERMIT NO.		9. WELL NO. #1-36	
15. ELEVATIONS (Show whether DF, RT, OR, etc.)		10. FIELD AND POOL, OR WILDCAT Natural Buttes	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 36, T9S, R21E	
		12. COUNTY OR PARISH Uintah	13. STATE UT

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐FULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐Spill ☒(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Listed below are the details of the spill that occurred at the Morgan State 1-36 on June 6, 1985. The spill was discovered at 9:00AM on June 6, 1985.

A malfunction of the water dump valve on the separator unit causing oil and water to be sent to the oil stock tank creating excess volume and consequent over flow of oil from tank. The fluid consists of 120 B0 at 52.8 gravity (condensate). All fluid was contained inside spill containment area around tank. No clean-up necessary. The condensate soaked into the ground and evaporated. No damage reported.

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE Area Production Superintendant DATE June 10, 1985

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Gulf Oil Exploration and Production Company

L. G. Rader
PRODUCTION MANAGER - CASPER AREA

July 2, 1985

P. O. Box 2619
Casper, WY 82602

State of Utah
Division of Oil, Gas and Mining
355 West North Temple
3 Triad Center, Suite 350
Salt Lake City, Utah 84180-1203

RECEIVED

JUL 05 1985

Gentlemen:

DIVISION OF
GAS & MINING

Effective July 1, 1985, the corporate name of Gulf Oil Corporation was changed to Chevron U.S.A. Inc. This will be applicable to all operations, agreements, contracts, documents, and permits of Gulf Oil Corporation in the area of and/or under your jurisdiction.

The attached information is being furnished to facilitate the name change of appropriate records under your authority, and submitted as our understanding of the procedure required to accomplish the change.

Please advise this office or the office listed on the attachments should additional information be needed.

Sincerely,



L. G. Rader

KWR/mdb

Attachments



A DIVISION OF GULF OIL CORPORATION

TELEPHONE: (307) 235-1311

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. ML-22265	
2. NAME OF OPERATOR Chevron U.S.A. Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 599, Denver, CO 80201		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State regulation. See also space 17 below.) At surface 2215' FNL 1876' FWL		8. FARM OR LEASE NAME Morgan-State	
14. PERMIT NO. API-43-047-30600-00		9. WELL NO. 1-36	
15. ELEVATIONS (Show whether DF, ST, OR, etc.) 5017' KB		10. FIELD AND POOL, OR WILDCAT Natural Buttes	
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec 36, T9S, R21E	
		12. COUNTY OR PARISH Uintah	
		13. STATE Utah	

RECEIVED
MAR 31 1986DIVISION OF
OIL, GAS & MINING

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	(Other) <input type="checkbox"/>	

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

During the workover on subject well, a CIBP was set at 6900' excluding the Mesaverde perms 6962'-9372'. The 5½" casing was tested and found to be faulty with leaks located from 4020' to 4262'. A casing inspection log run confirmed holes @ 4020'-4262' and indicated numerous other bad areas. Therefore, it is proposed to change procedure as follows:

1. Set Model "F" packer at 5350'. Hydra-test tubing and seal assembly in hole to 3500#.
2. Tag packer - space out tubing. Swab tubing to ±3000'. Perforate 5670'-76' w/4TJPF.
3. Flow test well. Cement squeeze perms 5670'-76' w/±100 sks cement.
4. Casing patch or plug and abandon well is dependent on flow results.

This procedure was verbally discussed by Larry Lee, Chevron, and Ron Firth, UO&GC, by telephone 3-26-86.

3 - STATE
3 - BLM
1 - BJK
1 - GDE
3 - DRLG
1 - FILE

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE Associate Environmental Specialist

DATE March 27, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MINING

DATE: 4-1-86

BY: John R. Baya

*See Instructions on Reverse Side

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)1. OIL WELL ☐ GAS WELL ☒ OTHER ☐

2. NAME OF OPERATOR

Chevron U.S.A. Inc.

3. ADDRESS OF OPERATOR

P. O. Box 599, Denver, CO 80201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

2215' FNL 1876' FWL

14. PERMIT NO.

API-43-047-30600-00

15. ELEVATIONS (Show whether OF, RT, OR, etc.)

5017' KB

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐(Other) Recomplete in Wasatch☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

It is proposed to temporarily exclude the Mesaverde Formation and recomplete in the Wasatch Formation as follows:

1. MIR - Kill well. N/U and test BOPE. POOH with tubing.
2. Wireline set CIBP at 6900' - Cap with 5' cement (excluding Mv perms 6962'-9372'.) Run CBL 5800'-5000'; recement if necessary.
3. Selectively perforate thru tubing the following zones. Swab test - cement squeeze or fracture stimulation treatment dependent on swab results.
Zone #1 - 5660'-5664' and 5668'-5680.
Zone #2 - 5574'-5582'.
Zone #3 - 5527'-5534.

4. Run production packer and tubing. N/D BOPE - N/U Wellhead.
5. Swab well in. Release rig.

Work is expected to commence by March 25, 1986.

3 - STATE
1 - BJK
1 - GDE
3 - GHW
1 - VAB
1 - LLK

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE Associate Environmental SpecialistDATE March 10, 1986

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MININGDATE 3-18-86BY John R. Bay

*See Instructions on Reverse Side

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

6

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. ML-22265	
2. NAME OF OPERATOR Chevron U.S.A. Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 599, Denver, Colorado 80201		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2215' FNL 1876' FWL		8. FARM OR LEASE NAME Morgan State	
		9. WELL NO. 1-36	
		10. FIELD AND POOL, OR WILDCAT Natural Buttes	
		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec 36, T9S, R21E	
14. PERMIT NO. API-43-047-30600-00	15. ELEVATIONS (Show whether OF, RT, GR, etc.) 5017' KB	12. COUNTY OR PARISH Uintah	13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input checked="" type="checkbox"/> and	ABANDONMENT* <input type="checkbox"/>
(Other) <u>Temp. suspension</u>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

MIRU Western Rig 18 on 3/19/86. Kill well. ND tree. NUBOPs. POH w/2-3/8" prod tubing & R-3 packer. TIH w/bit & scraper to 6979'. POH. Run gauge ring to 6900'. Set Baker CIBP @ 6900'. Dump 1 sk cement on CIBP. TIH w/retriv-pkr. Locate holes in casing f/4020'-4262'. POH. Run casing inspection, CBL-VDL-GR and pipe recovery logs. Set Baker F-1 packer @ 5350'. TIH hydrotesting tubing to 5350'. Swab well to 4000'. Perf Wasatch FM f/5670'-76' w/4 spf 0° phasing. Swab well in. Acidize perms w/500 gal 15% HCl acid. Swab well in and flow test. Kill well. Mix & pump 100 sks 'G' cement down tubing. Squeeze perms f/5670'-76' w/75 sks. Left 23 sks in casing. Top cement at 5450'. Shut-in well f/2½ hrs. Wait on cement. POH to 3812'. NDBOP. Land kill string. NU tree. Shut-in well. Rig down. Move off location on 4/1/86. Operations temporarily suspended pending further evaluation and operational procedures.

Sundry Notices will follow with planned intent.

RECEIVED
APR 03 1986DIVISION OF
OIL, GAS & MINING

3 - STATE
2 - BLM
1 - BJK
1 - GDE
3 - GHW
1 - FILE
1 - JSL
1 - Sec. 724-C

18. I hereby certify that the foregoing is true and correct

SIGNED

*J. L. Embrey*TITLE Associate Environmental
Specialist

DATE April 1, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. ML-22265	
2. NAME OF OPERATOR Chevron U.S.A. Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 599, Denver, Colorado 80201		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2215' FNL 1876' FWL		8. FARM OR LEASE NAME Morgan State	
14. PERMIT NO. API-43-047-30600-00		9. WELL NO. 1-36	
15. ELEVATIONS (Show whether OF, RT, OR, etc.) 5017' KB		10. FIELD AND POOL, OR WILDCAT Natural Buttes	
		11. SEC., T., R., M., OR BLK. AND SUBVEY OR AREA Sec 36, T9S, R21E	
		12. COUNTY OR PARISH Uintah	13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☒ and

(Other) temp. suspension

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

MIRU Western Rig 18 on 3/19/86. Kill well. ND tree. NUBOPs. POH w/2-3/8" prod tubing & R-3 packer. TIH w/bit & scraper to 6979'. POH. Run gauge ring to 6900'. Set Baker CIBP @ 6900'. Dump 1 sk cement on CIBP. TIH w/retriv-pkr. Locate holes in casing f/4020'-4262'. POH. Run casing inspection, CBL-VDL-GR and pipe recovery logs. Set Baker F-1 packer @ 5350'. TIH hydrotesting tubing to 5350'. Swab well to 4000'. Perf Wasatch FM f/5670'-76' w/4 spf 0° phasing. Swab well in. Acidize perfs w/500 gal 15% HCl acid. Swab well in and flow test. Kill well. Mix & pump 100 sks 'G' cement down tubing. Squeeze perfs f/5670'-76' w/75 sks. Left 23 sks in casing. Top cement at 5450'. Shut-in well f/2½ hrs. Wait on cement. POH to 3812'. NDBOP. Land kill string. NU tree. Shut-in well. Rig down. Move off location on 4/1/86. Operations temporarily suspended pending further evaluation and operational procedures.

Sundry Notices will follow with planned intent.

RECEIVED
APR 03 1986DIVISION OF
OIL, GAS & MINING
3 - STATE
2 - BLM
1 - BJK
1 - GDE
3 - GHW
1 - FILE
1 - 75L
1 - Sec. 724-C

18. I hereby certify that the foregoing is true and correct

SIGNED

*J. L. Philip...*TITLE Associate Environmental
Specialist

DATE April 1, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. ML-22265	
2. NAME OF OPERATOR Chevron U.S.A. Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 599, Denver, CO 80201		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations. See also space 17 below.) At surface 2215' FNL 1876' FWL		8. FARM OR LEASE NAME Morgan State	
14. PERMIT NO. API 43-047-30600-00		9. WELL NO. 1-36	
15. ELEVATIONS (Show whether DT, RT, CR, etc.) 5017' KB		10. FIELD AND POOL, OR WILDCAT Natural Buttes	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 36, T9S, R21E	
		12. COUNTY OR PARISH Uintah	
		13. STATE Utah	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input checked="" type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input checked="" type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) Recomplete in Wasatch Fm <input checked="" type="checkbox"/>		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log (form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

It is proposed to repair and recomplete the well in the Wasatch Fm as follows: MIRU. ND tree. NUBOP POH w/prod tubing. Cut off bad 5½" casing between 4700' and 4300', below holes in casing @ 4262'. Pull 5½" casing. TIH w/bit to casing stub. Circulate and condition mud. POH. TIH w/5½" casing patch and new 5½" casing. Cement 5½" casing using sufficient cement to bring cement to surface. Drill out cement and test patch. POH. TIH w/pkr milling tool. POH w/F-1 pkr @ 5340'. Drill out cement to PBTD @ 6900'. TIH w/pkr & RBP. Set RBP @ 5750' and pkr @ 5600'. Perf Wasatch Fm f/5660'-64', 5668'-80' thru tubing w/1-9/16" gun, 2 spf, 0° phasing. Swab test perfs. Fracture stimulate if necessary. Estimated volumes - 30,000 gals gelled water and 75,000# 20/40 sand. Flow test well. Reset tools w/RBP @ 5560' and pkr @ 5400'. Perf Wasatch Fm f/5527'-5534' thru tubing w/1-9/16" gun, 2 spf, 0° phasing. Swab test. Fracture stimulate if necessary. Estimated volumes - 24,000 gals gelled water and 60,000# 20/40 sand. Flow test. Kill well. POH w/tools. Set permanent pkr @ 5400'. TIH w/prod tubing. Test annulus. NDBOP NU tree. RD. Turn well over to production.

Work is expected to begin 5/27/86.

3 - STATE	1 - GDE
2 - BLM	3 - DRLG
1 - BJK	1 - FILE

18. I hereby certify that the foregoing is true and correct

SIGNED

L. L. Pugh

TITLE

Associate Environmental Specialist

DATE May 21, 1986

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MINING

DATE: 6-2-86

BY: John R. Day

*See Instructions on Reverse Side

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. ML-22265	
2. NAME OF OPERATOR Chevron U.S.A. Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 599, Denver, Colorado 80201		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2215' FNL 1876' FWL		8. FARM OR LEASE NAME Morgan State	
14. PERMIT NO. 43 047-30600		9. WELL NO. 1-36	
15. ELEVATIONS (Show whether OF, AT, OR, etc.) 5017' KB		10. FIELD AND POOL, OR WILDCAT Natural Buttes	
		11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA Sec. 36, T9S, R21E	
		12. COUNTY OR PARISH Uintah	
		13. STATE Utah	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	FULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>

(Other)

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

From 5527'-5534'
5660'-5664'
5668'-5680'

To 5574'-5582'
5660'-5664'
5668'-5680'
6802'-6812'
6838'-6843'

All perfs in Wasatch Formation.

3-State
2-BLM
1-RJK
1-GDE
3-Drilling
1-File

18. I hereby certify that the foregoing is true and correct

SIGNED L. A. Wickpatrick, Jr.TITLE Associate Environmental SpecialistDATE May 27, 1986

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MININGDATE 6-2-86BY John L. Bays

*See Instructions on Reverse Side

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	
2. NAME OF OPERATOR Chevron U.S.A. Inc.	
3. ADDRESS OF OPERATOR P. O. Box 599, Denver, Colorado 80201	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2215' FNL 1876' FWL	
14. PERMIT NO. 43-047-30600	15. ELEVATIONS (Show whether OF, RT, OR, etc.) 5017' KB

RECEIVED

AUG 04 1986

DIVISION OF OIL
GAS & MINING

5. LEASE DESIGNATION AND SERIAL NO. ML-22265
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME Morgan State
9. WELL NO. 1-36
10. FIELD AND POOL, OR WILDCAT Natural Buttes
11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA Sec 36, T9S, R21E
12. COUNTY OR PARISH Uintah
13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Recompletion ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

REPAIRING WELL ☒ALTERING CASING ☐ABANDONMENT* ☐

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

MIRU Western Rig 18 on 5/31/86. NUBOP. Cut csg @4710'. POH & LD csg. Run 5½ 15.5 K55 LTC & patch to 4710'. Cmt to surf w/1000 sks C1 'H' + 16% gel & 300 sks C1 'H' neat. Had cmt returns to surf. Clean out and test csg to 500 psi. Mill over and retrieve F-1 pkr @ 5350'. Clean out to 6892' PBTD. TIH w/RBP & pkr. Set tools. Perf 6838'-43' & 6802'-12' w/1-9/16" gun 2 spf 0° phasing. Frac perfs w/41500 gals gelled wtr & 70500# 20/40 sd. Swab and flow test zone. Kill well. Reset tools. Perf 5668'-80' & 5660'-64' w/1-9/16" gun 2 spf 0° phasing. Foam frac perfs w/8770 gal gel agent; 456148 scf N₂ & 50000# 20/40 sd. Flow test zone. Kill well. Reset tools. Perf 5574'-82' w/1-9/16" gun 2 spf 0° phasing. Foam frac perfs w/7690 gal gel agent, 346000 scf N₂ & 44000# 20/40 sd. Flow test zone. Kill well. Set WB perm-pkr @ 5400'. TIH w/prod tbg and seal assembly. Land tbg. Test annulus to 500 psi. NDBOP. NU tree. Test to 5000 psi. Swab in and flow test well. Set BPV. RD. Release rig on 7/25/86.. Turn well over to prod.

3 - STATE
2 - BLM
1 - BJK
1 - GDE
2 - DRILLING
1 - FILE
1 - JSL
1 - Sec. 724-C

18. I hereby certify that the foregoing is true and correct

SIGNED L.L. AnshpatriukTITLE Associate Environmental SpecialistDATE July 29, 1986

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. ML-22265
2. NAME OF OPERATOR Chevron U.S.A. Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 599, Denver, Colorado 80201		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2215' FNL 1876' FWL		8. FARM OR LEASE NAME Morgan State
14. PERMIT NO. 43-047-30600		9. WELL NO. 1-36
15. ELEVATIONS (Show whether OF, BT, GR, etc.) 5017' KB		10. FIELD AND POOL, OR WILDCAT Natural Buttes
		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec 36, T9S, R21E
		12. COUNTY OR PARISH Uintah
		13. STATE Utah

RECEIVED

AUG 04 1986

DIVISION OF OIL
& GAS MINING

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PULL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETE

☐

SHOOT OR ACIDIZE

☐

ABANDON*

☐

REPAIR WELL

☐

CHANGE PLANS

☐

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☒

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT*

☐

(Other) Recompletion

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

MIRU Western Rig 18 on 5/31/86. NUBOP. Cut csg @4710'. POH & LD csg. Run 5½ 15.5 K55 LTC & patch to 4710'. Cmt to surf w/1000 sks Cl 'H' + 16% gel & 300 sks Cl 'H' neat. Had cmt returns to surf. Clean out and test csg to 500 psi. Mill over and retrieve F-1 pkr @ 5350'. Clean out to 6892' PBTD. TIH w/RBP & pkr. Set tools. Perf 6838'-43' & 6802'-12' w/1-9/16" gun 2 spf 0° phasing. Frac perfs w/41500 gals gelled wtr & 70500# 20/40 sd. Swab and flow test zone. Kill well. Reset tools. Perf 5668'-80' & 5660'-64' w/1-9/16" gun 2 spf 0° phasing. Foam frac perfs w/8770 gal gel agent; 456148 scf N₂ & 50000# 20/40 sd. Flow test zone. Kill well. Reset tools. Perf 5574'-82' w/1-9/16" gun 2 spf 0° phasing. Foam frac perfs w/7690 gal gel agent, 346000 scf N₂ & 44000# 20/40 sd. Flow test zone. Kill well. Set WB perm-pkr @ 5400'. TIH w/prod tbg and seal assembly. Land tbg. Test annulus to 500 psi. NDBOP. NU tree. Test to 5000 psi. Swab in and flow test well. Set BPV. RD. Release rig on 7/25/86. Turn well over to prod.

3 - STATE

2 - BLM

1 - BJK

1 - GDE

2 - DRILLING

1 - FILE

1 - JSL

1 - Sec. 724-C

18. I hereby certify that the foregoing is true and correct

SIGNED

*L. L. Kinkpatrick*TITLE Associate Environmental
Specialist

DATE July 29, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

SUBMIT IN DUPLICATE*

STATE OF UTAH

(See other instructions on reverse side)

OIL & GAS CONSERVATION COMMISSION

080605

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____

b. TYPE OF COMPLETION:

NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☒ DIFF. RESVR. ☒ Other _____

2. NAME OF OPERATOR

Chevron U.S.A. Inc.

3. ADDRESS OF OPERATOR

P. O. Box 599, Denver, CO 80201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 2215' FNL 1876' FWL

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO.

DATE ISSUED

43-047-30600

RECEIVED
AUG 04 1986
DIVISION OF OIL
GAS & MINING

5. LEASE DESIGNATION AND SERIAL NO.

ML-22265

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Morgan State

9. WELL NO.

1-36

10. FIELD AND POOL, OR WILDCAT

Natural Buttes

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec 36, T9S, R21E

12. COUNTY OR PARISH

Uintah

13. STATE

Utah

15. DATE SPUDDED

7-29-79

16. DATE T.D. REACHED

8-21-79

17. DATE COMPL. (Ready to prod.)

7-26-86

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

5006' GL

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

9531'

21. PLUG, BACK T.D., MD & TVD

6892' w/CIBP

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

O-TD

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Wasatch Perfs f/5574'-6843'

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

BHC-GR, DLL-GR, FDC-CNL-GR, CBL-CL-GR, Temp Svy

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8		65			
9-5/8	36	2487	12 1/4	825	None
5 1/2	17.00	9511-4710	8-3/4	1840	4710 (Replaced)
5 1/2	15.50	4710-0	8-3/4	1300 sks	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8		5400'

31. PERFORATION RECORD (Interval, size and number)

5574-82 1-9/16" gun 2 spf 0° phasing
 5660-64 1-9/16" gun 2 spf 0° phasing
 5668-80 1-9/16" gun 2 spf 0° phasing
 6802-12 1-9/16" gun 2 spf 0° phasing
 6838-43 1-9/16" gun 2 spf 0° phasing

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5574-82	Foam Frac 7690 gel agent, 346000 scf N ₂ , 44000 #20/40 sd
5660-80	Foam Frac 8770 gel agent, 456148 scf N ₂ , 50000 #20/40 sd
(Cont'd on back)	

XX* Perf/6962'-9372' (isolated w/CIBP @ PRODUCTION 6900' & 8' cmt)

DATE FIRST PRODUCTION

7-26-86

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

Flowing

WELL STATUS (Producing or shut-in)

Producing

DATE OF TEST

7-26-86

HOURS TESTED

8

CHOKE SIZE

20/64

PROD'N. FOR TEST PERIOD

OIL—BBL.

0

GAS—MCF.

606

WATER—BBL.

26.1

GAS-OIL RATIO

--

FLOW. TUBING PRESS.

900

CASING PRESSURE

0

CALCULATED 24-HOUR RATE

OIL—BBL.

0

GAS—MCF.

1,819

WATER—BBL.

78.3

OIL GRAVITY-API (CORR.)

--

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Sold

TEST WITNESSED BY

Garrett Eckerdt

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

[Signature]

TITLE Associate Environmental Specialist

DATE July 31, 1986

*(See Instructions and Spaces for Additional Data on Reverse Side)

860905 cp

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement". Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

(Continued from other side)

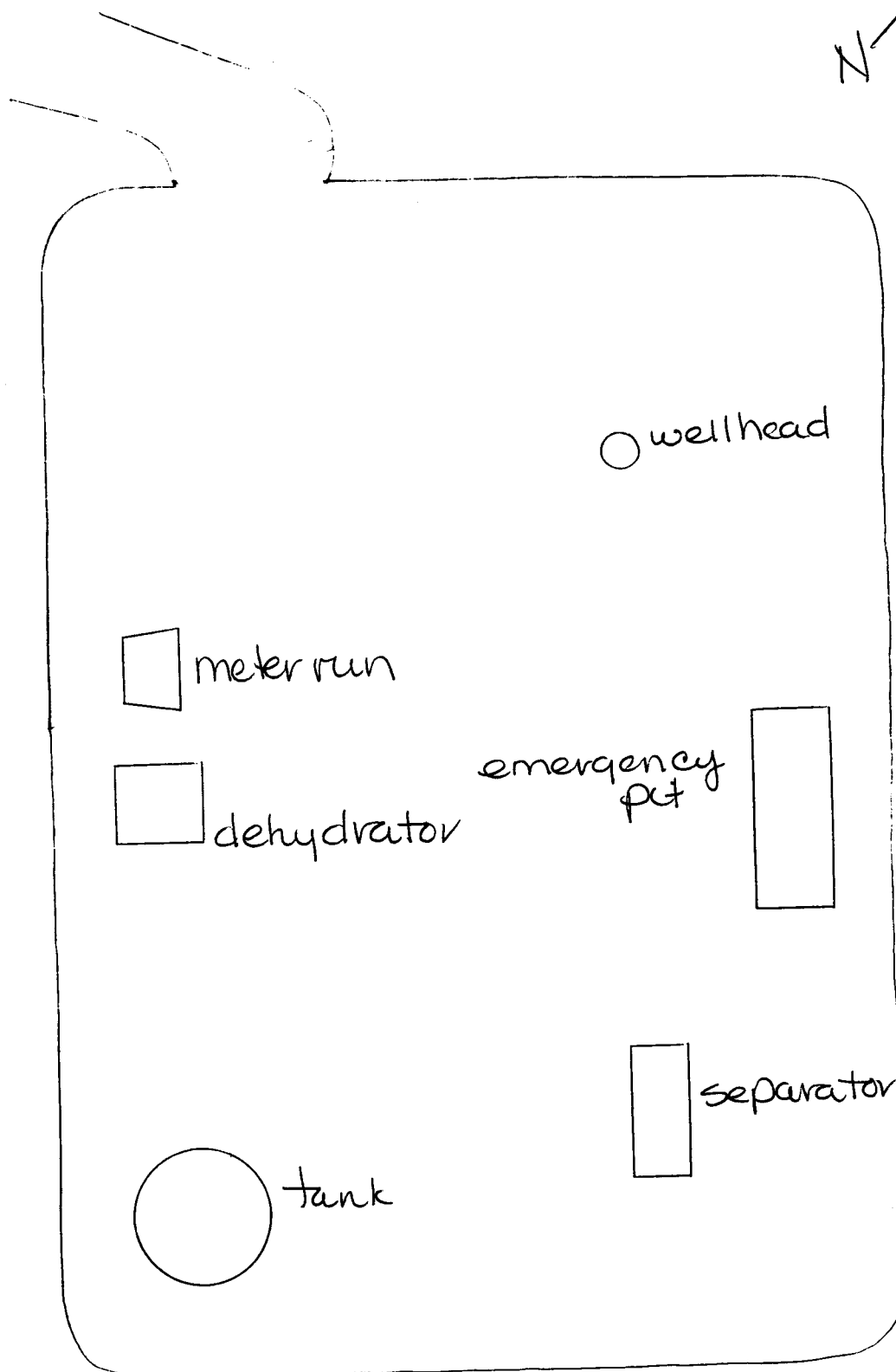
ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

6802-43 Gel Frac 41500 gal wtr & 70500 #20/40 sd

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH	TRUE VERT. DEPTH

Morgan State T-36 Sec 36, T9S, R21E Aug 1/30/89

N ↗



42,381 50 SHEETS 5 SQUARE
42,382 100 SHEETS 5 SQUARE
42,383 200 SHEETS 5 SQUARE
MADE IN U.S.A.



UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir
Use "APPLICATION FOR PERMIT--" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

Oil

Gas

☐

Well

☒

Well

☐

Other

2. Name of Operator

CHEVRON U.S.A. PRODUCTION COMPANY

3. Address and Telephone No.

11002 EAST 17500 SOUTH, VERNAL, UT 84078-8526 (801) 781-4302

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2215' FNL, 1876' FWL, SEC. 36, T9S/R21E

5. Lease Designation and Serial No.

ML-22265

6. If Indian, Allottee or Tribe Name

7. If Unit or C.A. Agreement Designation

MORGAN STATE

8. Well Name and No.

MORGAN STATE 1-36

9. API Well No.

43-047-30600

10. Field and Pool, or Exploratory Area

NATURAL BUTTES

11. County or Parish, State

UINTAH, UTAH

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐

Notice of Intent

☒

Subsequent Report

☐

Final Abandonment Notice

TYPE OF ACTION

☐

Abandonment

☐

Recompletion

☐

Plugging Back

☐

Casing Repair

☐

Altering Casing

☒

Other Step Rate Flow Test

☐

Change of Plans

☐

New Construction

☐

Non-Routine Fracturing

☐

Water Shut-Off

☐

Conversion to Injection

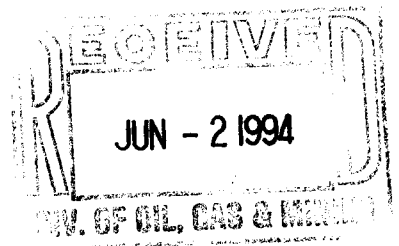
☐

Dispose Water

(Note) Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work)

During the period of 02/21/94 thru 02/26/94, 2682 MCFs were flared while completing a step rate flow test on subject well.



14. I hereby certify that the foregoing is true and correct.
Signed [Signature]

Title Operations Assistant

Date 06/01/94

(This space for Federal or State office use)

Approved by:

Title

Date

Conditions of approval, if any

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir
Use "APPLICATION FOR PERMIT--" for such proposals

5. Lease Designation and Serial No.

ML-22265

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Morgan State #1-36

9. API Well No.

43-047-30600

10. Field and Pool, or Exploratory Area

Natural Buttes

11. County or Parish, State

Uintah Co., Utah

SUBMIT IN TRIPLICATE

1. Type of Well

Oil

Gas

☐

Well

☒

Well

☐

Other

2. Name of Operator

Chevron USA Production Company

3. Address and Telephone No.

11002 East, 17500 South, Vernal, Utah 84078 (801) 781-4300

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2215 ft FNL, 1876 ft FWL

Section 36 - Township 9 South - Range 21 East

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐

Notice of Intent

☐

Subsequent Report

☐

Final Abandonment Notice

TYPE OF ACTION

☐

Abandonment

☐

Recompletion

☐

Plugging Back

☐

Casing Repair

☐

Altering Casing

☒

Other Designation/Change of Operator

☐

Change of Plans

☐

New Construction

☐

Non-Routine Fracturing

☐

Water Shut-Off

☐

Conversion to Injection

☐

Dispose Water

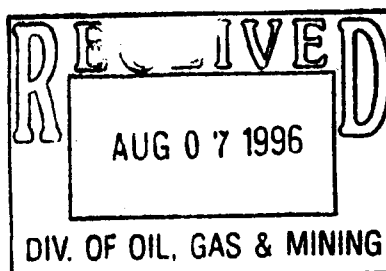
(Note) Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work)

DATE OF WORK

Please be advised that as of August 1, 1996 at noon, Coastal Oil & Gas Corporation is the designated operator of the Morgan State #1-36 well located in SE¼NW¼ S36-T9S-R21E. The designated operator has a local address as shown below:

Coastal Oil & Gas Corporation
PO Box 1148
Vernal, Utah 84078



14. I hereby certify that the foregoing is true and correct.
Signed [Signature]

Title Asset Team Leader

Date 8-2-96

(This space for Federal or State office use)

Approved by:

Title

Date

Conditions of approval, if any

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

STATE OF UTAH
DIVISION OF OIL, GAS AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, deepen existing wells, or to reenter plugged and abandoned wells.
Use APPLICATION FOR PERMIT TO DRILL OR DEEPEN form for such proposals.

1. Type of Well:

OIL ☐ GAS ☒ OTHER:

2. Name of Operator:

Coastal Oil & Gas Corporation

3. Address and Telephone Number:

P.O. Box 749, Denver, CO 80201-0749

(303) 573-4455

4. Location of Well

Footages: 2215' FNL & 1876' FWL

QQ, Sec., T., R., M.: SENW Section 36-T9S-R21E

5. Lease Designation and Serial Number:

ML-22265

6. If Indian, Allottee or Tribe Name:

N/A

7. Unit Agreement Name:

N/A

8. Well Name and Number:

Morgan State #1-36

9. API Well Number:

43-047-30600

10. Field and Pool, or Wildcat:

Natural Buttes Field

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

NOTICE OF INTENT

(Submit In Duplicate)

- | | |
|--|---|
| <input type="checkbox"/> Abandon | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Repair Casing | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans | <input type="checkbox"/> Recompletion |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Perforate |
| <input type="checkbox"/> Fracture Treat or Acidize | <input type="checkbox"/> Vent or Flare |
| <input type="checkbox"/> Multiple Completion | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Other _____ | |

Approximate date work will start _____

SUBSEQUENT REPORT

(Submit Original Form Only)

- | | |
|---|---|
| <input type="checkbox"/> Abandon * | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Repair Casing | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans | <input type="checkbox"/> Perforate |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Vent or Flare |
| <input type="checkbox"/> Fracture Treat or Acidize | <input type="checkbox"/> Water Shut-Off |
| <input checked="" type="checkbox"/> Other <u>Change of Operator</u> | |

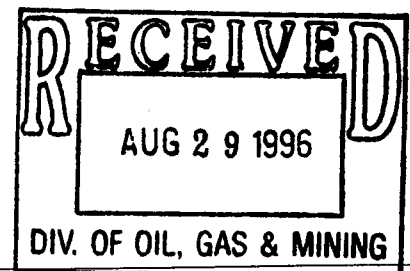
Date of work completion 8/1/96

Report results of Multiple Completions and Recompletions to different reservoirs on WELL COMPLETION OR RECOMPLETION REPORT AND LOG form.

* Must be accompanied by a cement verification report.

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Please be advised that effective August 1, 1996, at noon, Chevron USA Production Company turned over operatorship of the subject well to Coastal Oil & Gas Corporation. Bond coverage for lease activities is being provided by Coastal Oil & Gas Corporation under the State of Utah bond #102103. Coastal Oil & Gas Corporation, as operator, agrees to be responsible under the terms and conditions of the lease for the operations conducted upon leased lands.



13.

Name & Signature:

Title

Sheila Bremer

Environmental & Safety Analyst

Date

08/27/96

(This space for State use only)

OPERATOR CHANGE WORKSHEET

Attach all documentation received by the division regarding this change.
Initial each listed item when completed. Write N/A if item is not applicable.

1-LEC	6-LEC
2-GLH	7-KDR
3-DTS	8-SJ
4-VLD	9-FILE
5-RJF	

☒ Change of Operator (well sold)

☐ Designation of Operator

☐ Designation of Agent

☐ Operator Name Change Only

The operator of the well(s) listed below has changed, effective: 8-1-96

TO: (new operator) COASTAL OIL & GAS CORP
(address) PO BOX 749
DENVER CO 80201-0749

Phone: (303) 572-1121
Account no. N0230

FROM: (old operator) CHEVRON USA INC
(address) PO BOX J SEC 975
CONCORD CA 94524

Phone: (801) 781-4300/VERNAL
Account no. N0210

WELL(S) attach additional page if needed:

Name: <u>MORGAN ST 1-36/MV&WS</u>	API: <u>43-047-30600</u>	Entity: <u>5445</u>	S <u>36</u>	T <u>9S</u>	R <u>21E</u>	Lease: <u>ML22265</u>
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____

OPERATOR CHANGE DOCUMENTATION

- Yes 1. (r649-8-10) Sundry or other legal documentation has been received from the FORMER operator (attach to this form). (Rec'd 8-7-96)
- Yes 2. (r649-8-10) Sundry or other legal documentation has been received from the NEW operator (Attach to this form). (Rec'd 8-29-96)
- N/A 3. The Department of Commerce has been contacted if the new operator above is not currently operating any wells in Utah. Is the company registered with the state? (yes/no) _____. If yes, show company file number: _____.
- N/A 4. FOR INDIAN AND FEDERAL WELLS ONLY. The BLM has been contacted regarding this change. Make note of BLM status in comments section of this form. BLM approval of Federal and Indian well operator changes should ordinarily take place prior to the division's approval, and before the completion of steps 5 through 9 below.
- Yes 5. Changes have been entered in the Oil and Gas Information System (3270) for each well listed above. (8-29-96)
- Yes 6. Cardex file has been updated for each well listed above. (8-29-96)
- Yes 7. Well file labels have been updated for each well listed above. (8-29-96)
- Yes 8. Changes have been included on the monthly "Operator, Address, and Account Changes" memo for distribution to Trust Lands, Sovereign Lands, UGS, Tax Commission, etc. (8-29-96)
- Yes 9. A folder has been set up for the Operator Change file, and a copy of this page has been placed there for reference during routing and processing of the original documents.

ENTITY REVIEW

- Lic 1. (r649-8-7) Entity assignments have been reviewed for all wells listed above. Were entity changes made? (yes/no) (no) If entity assignments were changed, attach copies of Form 6, Entity Action Form.
- N/A 2. Trust Lands, Sovereign Lands, Tax Commission, etc., have been notified through normal procedures of entity changes.

BOND VERIFICATION - (~~FEE WELLS ONLY~~) *Trust Lands/Blanket Bond - OK*

- Lic 1. (r649-3-1) The NEW operator of any ~~fee lease~~ well listed above has furnished a proper bond.
- N/A 2. A copy of this form has been placed in the new and former operator's bond files.
- N/A 3. The FORMER operator has requested a release of liability from their bond (yes/no) _____, as of today's date _____. If yes, division response was made to this request by letter dated _____.

LEASE INTEREST OWNER NOTIFICATION OF RESPONSIBILITY

- DT's 1. Copies of documents have been sent on 9/6/96 to Ed Bonner at Trust Lands for changes involving State leases, in order to remind that agency of their responsibility to review for proper bonding.

FILMING

- VDR 1. All attachments to this form have been microfilmed. Today's date: Sept. 18, 1996.

FILING

- ___ 1. Copies of all attachments to this form have been filed in each well file.
- ___ 2. The original of this form, and the original attachments are now being filed in the Operator Change file.

COMMENTS

DOGM SPEED LETTER

To: Ed Bonner

From: Don Staley

School & Institutional Trust

Division of Oil, Gas & Mining

Lands Administration

Subject: Operator Change

MESSAGE

Date September 6 19 96

Ed,

For your information, attached are copies of documents regarding an operator change on a state lease(s)

These companies have complied with our requirments. Our records have been updated. Bonding should be reviewed by your agency ASAP.

Former Operator: Chevron USA Inc (N0210)

New Operator: Coastal Oil & Gas Corp (N0230)

Well(s):	API:	Entity:	S-T-R:	Lease:
Morgan State 1-36	43-047-30600	05445	36-09S-21E	ML22265

cc: Operator File

Signed



REPLY

Date _____ 19 ____

Signed _____

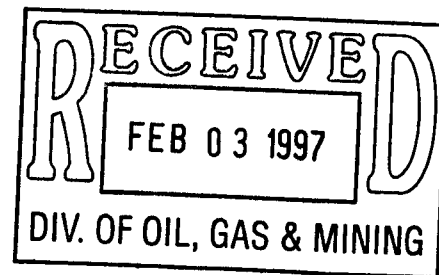
STATE OF UTAH
DIVISION OF OIL, GAS AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, deepen existing wells, or to reenter plugged and abandoned wells. Use APPLICATION FOR PERMIT TO DRILL OR DEEPEN form for such proposals.		5. Lease Designation and Serial Number: ML-22265
		6. If Indian, Allottee or Tribe Name: N/A
		7. Unit Agreement Name: N/A
1. Type of Well: OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/> OTHER:		8. Well Name and Number: Morgan State #1-36
2. Name of Operator: Coastal Oil & Gas Corporation		9. API Well Number: 43-047-30600
3. Address and Telephone Number: P.O. Box 749, Denver, CO 80201-0749 (303) 573-4455		10. Field and Pool, or Wildcat: Natural Buttes Field
4. Location of Well Footages: 2215' FNL & 1876' FWL County: Uintah QQ, Sec., T., R., M.: SENW Section 36-T9S-R21E State: Utah		

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA																											
<p style="text-align: center;">NOTICE OF INTENT (Submit in Duplicate)</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Abandon</td> <td><input type="checkbox"/> New Construction</td> </tr> <tr> <td><input type="checkbox"/> Repair Casing</td> <td><input type="checkbox"/> Pull or Alter Casing</td> </tr> <tr> <td><input type="checkbox"/> Change of Plans</td> <td><input type="checkbox"/> Recompletion</td> </tr> <tr> <td><input type="checkbox"/> Convert to Injection</td> <td><input type="checkbox"/> Perforate</td> </tr> <tr> <td><input type="checkbox"/> Fracture Treat or Acidize</td> <td><input type="checkbox"/> Vent or Flare</td> </tr> <tr> <td><input type="checkbox"/> Multiple Completion</td> <td><input type="checkbox"/> Water Shut-Off</td> </tr> <tr> <td colspan="2"><input checked="" type="checkbox"/> Other Commingle Wasatch and Mesa Verde</td> </tr> </table> <p>Approximate date work will start <u>Upon approval.</u></p>	<input type="checkbox"/> Abandon	<input type="checkbox"/> New Construction	<input type="checkbox"/> Repair Casing	<input type="checkbox"/> Pull or Alter Casing	<input type="checkbox"/> Change of Plans	<input type="checkbox"/> Recompletion	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Perforate	<input type="checkbox"/> Fracture Treat or Acidize	<input type="checkbox"/> Vent or Flare	<input type="checkbox"/> Multiple Completion	<input type="checkbox"/> Water Shut-Off	<input checked="" type="checkbox"/> Other Commingle Wasatch and Mesa Verde		<p style="text-align: center;">SUBSEQUENT REPORT (Submit Original Form Only)</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Abandon *</td> <td><input type="checkbox"/> New Construction</td> </tr> <tr> <td><input type="checkbox"/> Repair Casing</td> <td><input type="checkbox"/> Pull or Alter Casing</td> </tr> <tr> <td><input type="checkbox"/> Change of Plans</td> <td><input type="checkbox"/> Perforate</td> </tr> <tr> <td><input type="checkbox"/> Convert to Injection</td> <td><input type="checkbox"/> Vent or Flare</td> </tr> <tr> <td><input type="checkbox"/> Fracture Treat or Acidize</td> <td><input type="checkbox"/> Water Shut-Off</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Other _____</td> </tr> </table> <p>Date of work completion _____</p> <p><small>Report results of Multiple Completions and Recompletions to different reservoirs on WELL COMPLETION OR RECOMPLETION REPORT AND LOG form.</small></p> <p><small>* Must be accompanied by a cement verification report.</small></p>	<input type="checkbox"/> Abandon *	<input type="checkbox"/> New Construction	<input type="checkbox"/> Repair Casing	<input type="checkbox"/> Pull or Alter Casing	<input type="checkbox"/> Change of Plans	<input type="checkbox"/> Perforate	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Vent or Flare	<input type="checkbox"/> Fracture Treat or Acidize	<input type="checkbox"/> Water Shut-Off	<input type="checkbox"/> Other _____	
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12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Please see the attached procedure for work to be completed in the subject well.



13. Name & Signature: Bonnie Carson Title Senior Environmental Analyst Date 01/28/97

(This space for State use only)

Accepted by the
Utah Division of
Oil, Gas and Mining

FOR RECORD ONLY

2/10/97

MORGAN STATE 1-36
NATURAL BUTTES FIELD
SECTION 36 T9S R21E
WORKOVER PROCEDURE
COMMINGLE PRODUCTION *HW4*

WELL DATA

LOCATION: 2215' FNL 1876' FWL SEC. 36 T9S R21E
ELEVATION: 5006' GR., 5019' KB.
TD: 9531', PBTD 9511' (2/80); 6900' (7/86)
CSG: 9-5/8", 36.0#, K-55 @ 2487' w/ 825 SX.
5-1/2", 17.0#, K-55 @ 9511' w/ 1840 SX.
5-1/2", 15.5#, K-55 @ 4710' w/ 1300 SX. (1986)
TBG: 2-3/8", 4.7#, J-55 @ 5408' (1986)
FORMATION(S): MESAVERDE 6922' - 9372', 330 HOLES (2/80)
CIBP - 6900' (3/86)
WASATCH 5574' - 6843', 78 HOLES (7/86)

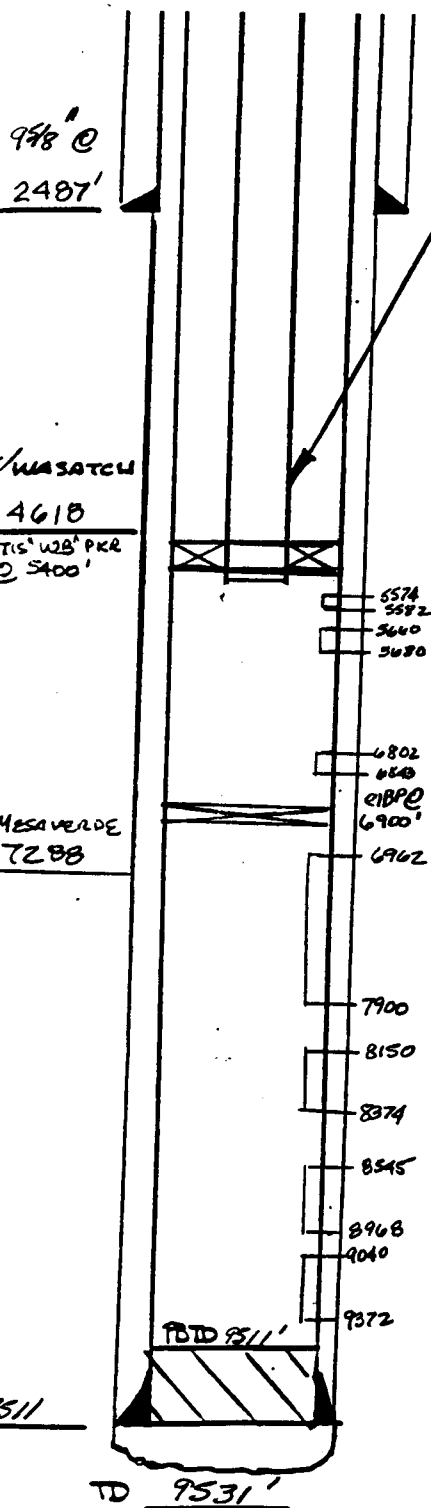
PROCEDURE

1. MI & RU pulling unit. Blow down & kill well w/ 3% KCL water. ND WH. NU BOP. POOH w 2-3/8" tbg.
2. RIH w/2-3/8" tbg & retrieving tool. Retrieve Otis WB pkr @ 5400'. POOH w 2-3/8" tbg & retrieving tool w/ pkr. LD retrieving tool and pkr. *"Packer plucker"*
3. TIH w/ 2-3/8" tbg & mill. Clean out to CIBP @ 6900'. Drill CIBP. **NOTE:** Pressure below CIBP. Drill CIBP and allow pressure to equalize before continuing to clean out to PBTD @ 9511'. BP @ 9372'. Circ. hole clean. **IF UNABLE TO DRILL CIBP IN 1 DAY** : call Denver office for instructions. *Schedule work to allow well to flow off head over weekend if possible.*
3. TOOH w/ 2-3/8" tbg & mill. TIH w/ 2-3/8" tbg and land tbg @ 8968'. *or bit*
4. ND BOP. NU WH. RD & MO pulling unit.
5. Install PLE. Swab/flow well to clean up. Return the well to sales.

MORGAN STATE 1-36
NATURAL BUTTES FIELD
SECTION 36 T9S R21E

WELL DATA

LOCATION: 2215' FNL 1876' FWL SEC. 36 T9S R21E
 ELEVATION: 5006' GR., 5019' KB.
 TD: 9531', PPTD 9511' (2/80); 6900' (7/86)
 CSG: 9-5/8", 36.0#, K-55 @ 2487' w/ 825 SX.
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 TBG: 2-3/8", 4.7#, J-55 @ 5408' (1986)
 FORMATION(S): MESAVERDE 6922' - 9372', 330 HOLES (2/80)
 CIBP - 6900' (3/86)
 WASATCH 5574' - 6843', 78 HOLES (7/86)



2 3/8" 47# @ 5408'

WASATCH (5574' - 6843') 5 sands 78 holes 1PF (7/86) 1819 MCF + 78 BLD
 OTIS' WB' PKR @ 5400' 2 1/4" ex FTP 900'

PERF 5574 - 5582 1 sand 16 holes FRAC'd w/ 44,000# sand + 7,690 gal gel + 346,000 SCF N2

PERF (5640 - 5644) 2 sands 22 holes FRAC'd w/ 50,000# sand + 8,770 gal gel + 456,488 SCF N2
 5640 - 5644 5648 - 5650

PERF (6802 - 6815) 2 SANDS 30 holes FRAC'd w/ 70,000# sand + 41,500 gal gel
 6802 - 6815 6838 - 6843

CASING HEAD 4020 - 4260'. CUT SK CAS @ 4710' RAN NEW 5/2" CSG (0-4710) CMT 1300 SCS
 (3/86) CIBP @ 6900' w/ 1 SK CMT on TOP

MESAVERDE (2/80) 6922 - 9372 1PF 870 MCF + 78 BLD 3 1/4" RTD 600'
 PROD. (2/80-3/86) 459,459 MCF + 2,487 BLD + UNK DW

PERF 6962 - 7000 8 sands 232 holes
 6962-72 7296-04 7480-90 7784-88
 7250-54 7440-50 76-83-90 7895-7900 BD w/ 6000 gal 15% HCL
 FRAC'd w/ 240,000# + 116,580 gal gel.

PERF 8150 - 8374 3 sands 24 holes
 8150-60 8218-24 8364-74 BD w/ 2500 gal 15% HCL + 40 BS
 FRAC'd w/ 100,000# sand + 52,000 gal gels.
 1 PF 190 MCF + 19 BLD 4 1/4" ex

PERF 1 JSPP (1 1/2" gun) 9040 - 9372 6 sands 37 holes
 9040-50 9178-85 9335-40
 9040-84 9248-58 9368-72 BD w/ 4000 gal 15% HCL + 50 BS.
 PERF 1 JSPP (1 1/2" gun) 8545 - 8968 6 sands 37 holes
 8545-52 8717-22 8884-90
 8612-18 8873-80 8962-68 BD w/ 4000 gal 15% HCL + 50 BS
 FRAC'd (8545 - 9372) 12 sands 74 holes
 105,200# sand + 79,298 gal gel KCL WATER.
 1PF 312 MCF + 7 BLD (H2O increases)

STATE OF UTAH
DIVISION OF OIL, GAS AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

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Use APPLICATION FOR PERMIT TO DRILL OR DEEPEN form for such proposals.

1. Type of Well: OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/> OTHER: _____		5. Lease Designation and Serial Number: ML-22265
2. Name of Operator: Coastal Oil & Gas Corporation		6. If Indian, Allottee or Tribe Name: N/A
3. Address and Telephone Number: P.O. Box 749, Denver, CO 80201-0749 (303) 573-4455		7. Unit Agreement Name: N/A
4. Location of Well Footages: 2215' FNL & 1876' FWL QQ, Sec., T., R., M.: SENW Section 36-T9S-R21E		8. Well Name and Number: Morgan State #1-36
		9. API Well Number: 43-047-30600
		10. Field and Pool, or Wildcat: Natural Buttes Field
		County: Uintah State: Utah

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

NOTICE OF INTENT

(Submit in Duplicate)

- | | |
|--|---|
| <input type="checkbox"/> Abandon | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Repair Casing | <input type="checkbox"/> Pull or Alter Casing |
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| <input type="checkbox"/> Multiple Completion | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Other _____ | |

Approximate date work will start _____

SUBSEQUENT REPORT

(Submit Original Form Only)

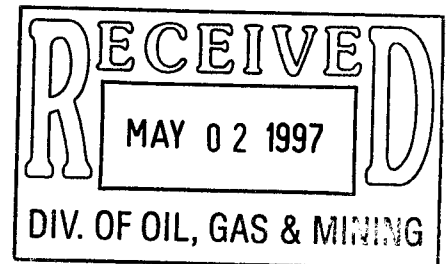
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|---|---|
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| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Vent or Flare |
| <input type="checkbox"/> Fracture Treat or Acidize | <input type="checkbox"/> Water Shut-Off |
| <input checked="" type="checkbox"/> Other <u>Commingle Wasatch and Mesa Verde</u> | |

Date of work completion 4/14/97Report results of **Multiple Completions** and **Recompletions** to different reservoirs on WELL COMPLETION OR RECOMPLETION REPORT AND LOG form.

* Must be accompanied by a cement verification report.

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Please see the attached chronological history for work completed in the subject well.



13. Name & Signature: Bonnie Carson Title Senior Environmental Analyst Date 04/28/97

(This space for State use only)

WO tax credit 12/97.

Commingle Prod & Install PLE

04/10/97 **POOH w/ tbg.** MIRU Colorado Well Service Rig #26. blow down & kill well w/30 bbls
2% KCl wtr. ND WH, NU BOP. Sting out of pkr. Start POOH w/tbg. Tbg has turned
down collars. (Will replace collars). SDFN
DC: \$5,000 TC: \$5,000

- 04/11/97 **POOH w/2 3/8" tbg & milling tool.** CP 600 psi, TP 600 psi. Well blew down. POOH w/2 3/8" tbg & replace all collars. RIH w/5 1/2" pkr milling tool on 2 3/8" tbg, tag @ 5400', milled Otis WB pkr. LD swivel. POOH w/stds of 2 3/8" tbg. SDFN
DC: \$4,430 TC: \$9,430
- 04/12/97 **Finish cleaning out wellbore / drill out CIBP @ 6900'.** CP 360 psi, TP 300 psi. Blew well down. POOH 2 3/8" tbg & milling tool. Retrieve Otis WB pkr. RIH 2 3/8" tbg & mill, tag @ 5311'. PU swivel & pump 90 bbls 2% KCl wtr, brake circ through 4 csg collars. Fell through, tag @ 6780', clean out well to 6875'. Circ btm up. LD swivel. POOH 2 3/8" tbg above perf. (24 stds) SI well. Pmp 210 BW, 0 BW recovered, Total 490 BLWTR
DC: \$7,160 TC: \$16,590
- 04/13/97 **Continue to clean to PBTD @ 9511' w/Air Foam Unit.** CP 650 psi, TP 800 psi. Blew well down. TIH 29 stds 2 3/8" tbg. PU swivel, tag @ 6875'. CO to CIBP @ 6900'. Drill CIBP. Press below CIBP @ 1000 psi. Hooked up FL w/ 20/64" chk to pit & let clean & equalize over night. Pmpd 106 BW, 0 BW recovered, total 546 BLWTR. SDFN
- Flow Back Report.**
- | <u>Time</u> | <u>TP</u> | <u>CHK</u> | <u>Wtr</u> | |
|-------------|-----------|------------|------------|--------------|
| 5:00 | 1700 | 20 | mist | |
| 6:00 | 1700 | 20 | mist | |
| 7:00 | 1700 | 20 | mist | |
| 8:00 | 1800 | 20 | mist | Change choke |
| 9:00 | 1800 | 20 | mist | |
| 10:00 | 2 000 | 20 | mist | |
| 11:00 | 2000 | 20 | mist | |
| 12:00 | 1800 | 20 | mist | |
| 1:00 | 1800 | 20 | mist | |
| 2:00 | 1800 | 20 | mist | |
| 3:00 | 1700 | 20 | mist | |
| 4:00 | 1700 | 20 | mist | |
| 5:00 | 1550 | 20 | mist | |
| 6:00 | 1550 | 20 | mist | |
- DC: \$3,585 TC: \$20,175
- 04/14/97 **RDMO.** Flow well to pit w/ 1500 psi CP on 20/64" chk w/light mist @ approx 3.0 MCFPD. Hooked up FL to sales line. SICP 2250 psi, SITP 2100 psi. Put well on @ 4:30 PM @ spot sales 1.5 MCF @ 24/64" chk. Wt rate @ approx 40 BWPH. 0 bbls pmpd, total 546 BLWTR SDFN
DC: \$7,850 TC: \$28,025
- 04/15/97 **Well on test.** CP 1350 psi, TP 800 psi. Flow test well overnight. CIG welded sales line. RDMO. Pmpd 0 BW, 60 BW recovered, total 486 BLWTR
DC: \$1,250 TC: \$29,275

04/16/97 Flowing 984 MCF, 50 BW, 800 TP, 875 CP, on 48/64" chk.

04/17/97 Flowing 480 MCF, 50 BW, 268 TP, 414 CP, on 35/64" chk.

04/18/97 Flowing 868 MCF, 100 BW, 400 TP, 800 CP, on 48/64" chk.

04/19/97 Flowing 828 MCF, 175 BW, 375 TP, 775 CP, on 48/64" chk.

04/21/97 Flowing 796 MCF, 100 BW, 375 TP, 775 CP, on 48/64" chk.

04/22/97 Flowing 752 MCF, 100 BW, 350 TP, 750 CP, on 48/64" chk.

04/23/97 Flowing 736 MCF, 100 BW, 350 TP, 730 CP, on 48/64" chk. **Final Report**

STATE OF UTAH
DIVISION OF OIL, GAS AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, deepen existing wells, or to reenter plugged and abandoned wells.
Use APPLICATION FOR PERMIT TO DRILL OR DEEPEN form for such proposals.

1. Type of Well:

OIL ☐ GAS ☒ OTHER:

2. Name of Operator:

Coastal Oil & Gas Corporation

3. Address and Telephone Number:

P.O. Box 749, Denver, CO 80201-0749

(303) 573-4455

4. Location of Well

Footages:

2215' FNL & 1876' FWL

QQ, Sec., T., R., M.:

SENW Section 36-T9S-R21E

5. Lease Designation and Serial Number:

ML-22265

6. If Indian, Allottee or Tribe Name:

N/A

7. Unit Agreement Name:

N/A

8. Well Name and Number:

Morgan State #1-36

9. API Well Number:

43-047-30600

10. Field and Pool, or Wildcat:

Natural Buttes Field

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

NOTICE OF INTENT

(Submit in Duplicate)

- | | |
|--|---|
| <input type="checkbox"/> Abandon | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Repair Casing | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans | <input type="checkbox"/> Recompletion |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Perforate |
| <input type="checkbox"/> Fracture Treat or Acidize | <input type="checkbox"/> Vent or Flare |
| <input type="checkbox"/> Multiple Completion | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Other _____ | |

Approximate date work will start _____

SUBSEQUENT REPORT

(Submit Original Form Only)

- | | |
|---|---|
| <input type="checkbox"/> Abandon * | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Repair Casing | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans | <input type="checkbox"/> Perforate |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Vent or Flare |
| <input type="checkbox"/> Fracture Treat or Acidize | <input type="checkbox"/> Water Shut-Off |
| <input checked="" type="checkbox"/> Other Install PLE | |

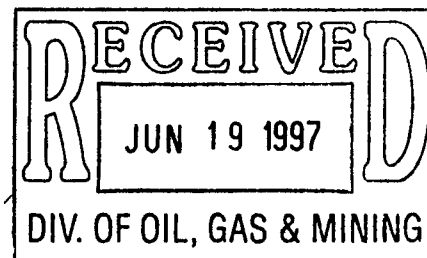
Date of work completion 5/30/97

Report results of **Multiple Completions** and **Recompletions** to different reservoirs on WELL COMPLETION OR RECOMPLETION REPORT AND LOG form.

* Must be accompanied by a cement verification report.

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Please see the attached chronological history for work completed in the subject well.



13.

Name & Signature:

Sheila Bremer

Title: Environmental & Safety Analyst

Date

06/17/97

(This space for State use only)

WO tax credit 12/97.

CHRONOLOGICAL HISTORY

Page 1

Csg: 5-1/2" @ 9511'; Perfs: 5574'-9372'

05/06/97 Flowing 664 MCF, 100 BW, 340 TP, 890 CP, on full choke.

05/07/97 Flowing 652 MCF, 50 BW, 340 TP, 800 CP, on full chk.

05/08/97 Flowing 643 MCF, 40 BW, 340 TP, 775 CP, on full chk.

05/09/97 Flowing 629 MCF, 50 BW, 335 TP, 775 CP, on full chk.

05/10/97 Flowing 622 MCF, 40 BW, 335 TP, 750 CP, on full chk.

05/11/97 Flowing 618 MCF, 40 BW, 335 TP, 750 CP, on full chk.

05/12/97 Flowing 615 MCF, 30 BW, 330 TP, 740 CP, on full chk.

05/13/97 Flowing 614 MCF, 40 BW, 330 TP, 750 CP, on full chk.

05/14/97 **NU WH & FL & RDMO.** Road rig from NBU #132 to Morgan State #1-36. MIRU. SICP 700 psi, SITP 350 psi. RU pmp & lines. Blow well dn. ND WH & NU BOPs w/hydril & SH. PU & LD wrap round & LD 111 jts 2 $\frac{3}{8}$ " tbg w NC & SN, EOT @ 5524', SN @ 5491'. LD tbg for production on logs. ND BOPs w/hydril & SH. NU WH & SDFN @ 7PM. Flowing 106 MCF, 30 BW, 1160 TP, 1060 CP, on full chk.
DC: \$3,691 TC: \$64,580

05/15/97 **Well on Production.** SICP 1000 psi, SITP 1000 psi. NU WH & FL & RDMO @ 8:00AM. Open well up & put on production @ 10:30AM. Flowing 718 MCF, 80 BW, 440 TP, 575 CP, on 35/64" chk, rec 425 BLW overload.
DC: \$201 TC: \$64,781

05/16/97 Flowing 660 MCF, 80 BW, 420 TP, 580 CP, on 35/64" chk.

05/17/97 Flowing 652 MCF, 30 BW, 287 TP, 532 CP, on 35/64" chk.

05/18/97 Flowing 648 MCF, 60 BW, 285 TP, 529 CP, on 35/64" chk.

05/19/97 Flowing 643 MCF, 60 BW, 325 TP, 525 CP, on 35/64" chk.

05/20/97 **Well on production.** MIRU Delsco WL. RIH, pull plunger spring. MIRU. Well Information Services. RIH production log equipment. Log from 9470' to 5400'. POH-RD & rls WIS. Return well to production. Flowing 636 MCF, 60 BW, 297 TP, 541 CP, on 35/64" chk. Testing.
DC: \$4,988 TC: \$69,769

05/21/97 Flowing 645 MCF, 60 BW, 343 TP, 566 CP, on 35/64" chk.

05/22/97 Flowing 623 MCF, 60 BW, 329 TP, 558 CP, on 35/64" chk. SI lower tbg.

05/23/97 Flowing 609 MCF, 60 BW, 260 TP, 602 CP, on 35/64" chk.

05/24/97 **Well put on production this AM.** MIRU Colorado Well Service Rig #26, ITP 350 psi, ICP 600 psi. Blew dn well. Kill tbg w/15 bbls 2% KCl. ND tree. NU BOP. PU tbg 109 jt, had to kill 3 times. PU pipe. Land @ 8955.81' w/NC, 1 jt, SN 286 jts. Kill tbg one more time. ND BOP. NU WH, CP 100 psi. SDFN - 75 BLWTR. No hanger tbg screwed to WH. Flowing 610 MCF, 50 BW, 400 TP, 800 CP, on 40/64" chk.
DC: \$10,763 TC: \$10,763

05/25/97 **On production.** Flowing 482 MCF, 60 BW, 310 TP, 775 CP, on 40/64" chk. Had Colorado Well swab. ITP 0 psi, ICP 1050 psi, IFL 3700', FFL 4300'. Made 4 swab runs, rec 36 BW. Well came around, blew to pit. Put on production line. FTP 450 psi, FCP 750 psi. Pmpd 75 BLW, rec 36 BLW, 39 BLWTR
DC: \$691 TC: \$11,454

05/26/97 Flowing 597 MCF, 60 BW, 350 TP, 730 CP, on 40/64" chk.

05/27/97 Flowing 580 MCF, 60 BW, 350 TP, 725 CP, on 40/64" chk.

05/28/97 Flowing 571 MCF, 60 BW, 284 TP, 690 CP, on 40/64" chk. **Final Report**

05/30/97 **Well on production.** MIRU Delsco WL. RIH - POH plunger & stop spring. RD & rls Delsco. MIRU Schlumberger WL. RIH - Production logging equipment. LC log, EOT to TD. POH. RD & rls Schlumberger WL. Left well on prod.
DC: \$9,470 TC: \$9,470

FORM 9

STATE OF UTAH
DIVISION OF OIL, GAS AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, deepen existing wells, or to reenter plugged and abandoned wells.
Use APPLICATION FOR PERMIT TO DRILL OR DEEPEN form for such proposals.

1. Type of Well: OIL ☐ GAS ☒ OTHER:

2. Name of Operator:
Coastal Oil & Gas Corporation

3. Address and Telephone Number:
P.O. Box 749, Denver, CO 80201-0749 (303) 573-4476

4. Location of Well:
Footage(s): See attached spreadsheet
QQ, Sec., T., R., M.:

5. Lease Designation and Serial Number:
See attached spreadsheet

6. If Indian, Allottee or Tribe Name:
N/A

7. Unit Agreement Name:
N/A

8. Well Name and Number:
See attached spreadsheet

9. API Well Number: 43-047-30600
See attached spreadsheet

10. Field and Pool, or Wildcat:
Natural Buttes

County: Uintah

State: Utah

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

11.

NOTICE OF INTENT (Submit in Duplicate)

- | | |
|--|---|
| <input type="checkbox"/> Abandon | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Repair Casing | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans | <input type="checkbox"/> Recompletion |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Perforate |
| <input type="checkbox"/> Fracture Treat or Acidize | <input type="checkbox"/> Vent or Flare |
| <input type="checkbox"/> Multiple Completion | <input type="checkbox"/> Water Shut-Off |
| <input checked="" type="checkbox"/> Other: Dispose water | |

Approximate date work will start: Upon approval

SUBSEQUENT REPORT (Submit Original Form Only)

- | | |
|--|---|
| <input type="checkbox"/> Abandon * | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Repair Casing | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans | <input type="checkbox"/> Perforate |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Vent or Flare |
| <input type="checkbox"/> Fracture Treat or Acidize | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Other | |

Date of work completion

Report results of Multiple Completions and Recompletions to different reservoirs on WELL COMPLETION OR RECOMPLETION REPORT AND LOG form.

* Must be accompanied by a cement verification report.

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

The Operator requests permission to dispose of produced water from the subject wells to the NBU #159 salt water disposal well. The water will be produced into tanks and transported by truck to the NBU #159. The subject wells are not part of the Natural Buttes Unit; however, the NBU #159 is a Unit well, located NW/SW Section 35, T9S-R21E.

Attached is an analysis of the injection zone water of the NBU #159, as well as a composite analysis of the water produced from three of the Section 36 wells.

13.

Name & Signature:

Bonnie Carson

Title: Senior Environmental Analyst

Date:

12/01/97

(This space for State use only)

(5/84)

(See instructions on Reverse Side)

Accepted by the State
of Utah Division of
Oil, Gas and Mining

Date: 12-2-97

By: [Signature]

Well Name	Location	Lease #	API #
Morgan State #1-36	2215' FNL & 1876' FWL Sec. 36 T9S-R21E	ML-22265	43-047-30600
Morgan State #2-36	900' FNL & 804' FWL Sec. 36 T9S-R21E	ML-22265	43-047-32585
Morgan State #3-36	521' FNL & 1940' FEL Sec. 36 T9S-R21E	ML-22265	43-047-32589
Morgan State #4-36	1912' FNL & 649' FWL Sec. 36 T9S-R21E	ML-22265	43-047-32729
Morgan State #5-36	2100' FSL & 1800' FEL Sec. 36 T9S-R21E	ML-22265	43-047-32735
Morgan State #6-36	1790' FNL & 712' FWL Sec. 36 T9S-R21E	ML-22265	43-047-32810
Morgan State #7-36	660' FNL & 1980' FWL Sec. 36 T9S-R21E	ML-22265	43-047-32811
Morgan State #8-36	650' FNL & 690' FEL Sec. 36 T9S-R21E	ML-22265	43-047-32812
Morgan State #9-36	1894' FNL & 1978' FEL Sec. 36 T9S-R21E	ML-22265	43-047-32815
Morgan State #10-36	1794' FNL & 649' FEL Sec. 36 T9S-R21E	ML-22265	43-047-32816
Morgan State #11-36	1943' FSL & 1843' FEL Sec. 36 T9S-R21E	ML-22265	43-047-32813
Morgan State #12-36	1992' FSL & 722' FEL Sec. 36 T9S-R21E	ML-22265	43-047-32814
Morgan State #13-36	540' FSL & 815' FEL Sec. 36 T9S-R21E	ML-22265	43-047-32817

ERGREEN ANALYTICAL, INC.
4036 Youngfield St. Wheat Ridge, CO 80033
(303)425-6021

NBU-159
SWD

Miscellaneous Analysis

Date Sampled : 6/12/93
Date Received : 6/23/93
Client Sample ID.: NBU UINTAH
Lab Sample No. : X72532

Client Project ID. : NBU UIC
Lab Project No. : INJECTION PROJ
Matrix : 93-2120
: Liquid phase

<u>Analysis</u>	<u>Result</u>	<u>Date Prepared</u>	<u>Date Analyzed</u>	<u>Method</u>
pH	7.84	6/23/93	6/23/93	EPA 150.1
Total Dissolved Solids (mg/L)	65200 (6.5%)	6/28/93	6/28/93	EPA 160.1
Specific Gravity @ 60°F	1.0451	6/29/93	6/29/93	ASTM D1217



Analyst



Approved

212001.10

7005

PAGE 18

07-07-93 02:45 PM FROM COASTAL OIL & GAS
TOTAL P.03

EXHIBIT "G2"

NBU #159

SWD

EVERGREEN ANALYTICAL, INC.
4036 Youngfield St. Wheat Ridge, CO 80033
(303) 425-6021

INORGANIC ANALYSIS DATA SHEET

Date Sampled : 6/12/93
Date Received : 6/23/93
Date Prepared : 6/24/93
Date Analyzed : 6/29/93

NBU UIC
Client Project : INJECTION PROJ.
Lab Project No. : 93-2120
Method : 600/4-79-020
Matrix : Water

Units: mg/L

Basis: Dissolved Metals

Client
Sample#

NBU UINTAH

Evergreen
Sample#

X72532

Detection
Limits

Ca 26
K 95
Mg 12
Na 23000

0.1
1.5
0.02
0.3

DC
Analyst

WKF
Approved

EVERGREEN ANALYTICAL, INC.
4036 Youngfield Street Wheat Ridge, CO 80033
(303) 425-6021

NBU #759
SWD

Anions

Date Sampled : 6/12/93
Date Received : 6/23/93
Date Prepared : 6/23/93
Date Analyzed : 6/23/93

Client Project ID : NBU UIC INJECTION PROJ
Lab Project No. : 93-2120
Method : EPA Method 300.0

Client Sample ID
Evergreen Sample #
Matrix
Chloride (mg/L)
Nitrite-N (mg/L)*
Sulfate (mg/L)

NBU					
UNTAN					
X72532					
Liquid					
Waste					
42800(4.38)					
<38.0					
3.13					

To: <i>For Sample</i>	From: <i>Coal Creek</i>
at: <i>Control</i>	Co: <i>7/5</i>
Dept.:	Phone: <i>1090</i>
Fax: <i>573-4477</i>	Fax: <i>573-4477</i>

PAGE 20

* Sample received after holding time expired. Detection limit raised due to matrix interference.

[Signature]
Analyst

[Signature]
Approved

2120ml.24

EXHIBIT "G3"

DEC 1 1997 10:15 FR BJ SERVICES-VERNAL 801 789 4530 TO 7894436

P.01

FW01W273

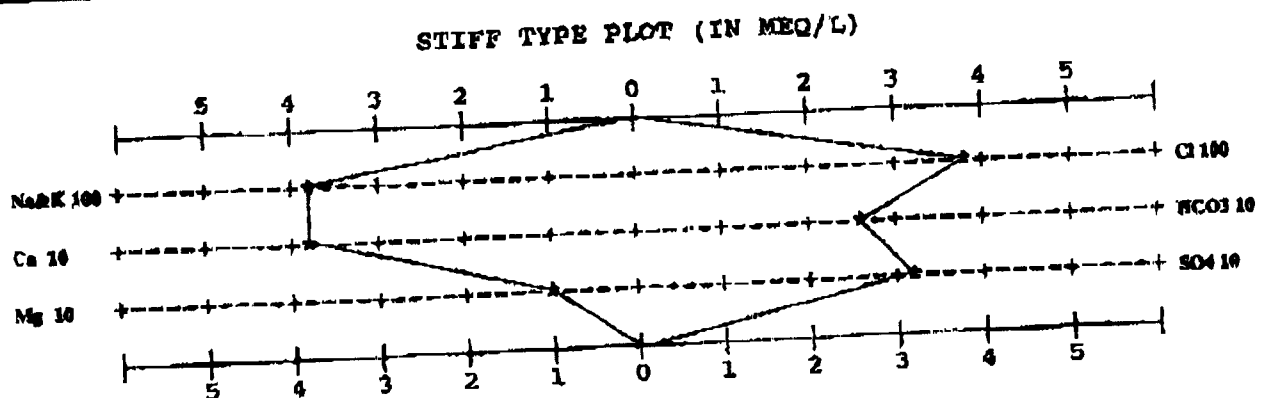
BJ SERVICES COMPANY
WATER ANALYSIS #FW01W273
VERNAL LAB

Morgan State

3-36, 5-36, 13-36

GENERAL INFORMATION	
OPERATOR:	COASTAL
WELL:	MORGAN STATES-36, 13-36, 3-36
FIELD:	NATURAL BUTTE
SUBMITTED BY:	
WORKED BY:	TROY HINEMAN
PHONE NUMBER:	789-4436
DEPTH:	
DATE SAMPLED:	11/19/97
DATE RECEIVED:	11/20/97
COUNTY:	UINTAH
FORMATION:	WASATCH
STATE:	UT

SAMPLE DESCRIPTION	
FILTERED WITH A DARK TINT.	
PHYSICAL AND CHEMICAL DETERMINATIONS	
SPECIFIC GRAVITY:	1.030 @ 68°F PH: 7.00
RESISTIVITY (CALCULATED):	0.155 ohms @ 75°F
IRON (FE++) :	50 ppm
CALCIUM:	777 ppm
MAGNESIUM:	118 ppm
CHLORIDE:	13,201 ppm
SODIUM+POTASS:	11,839 ppm
IODINE:	
SULFATE:	1,553 ppm
TOTAL HARDNESS	2,429 ppm
BICARBONATE:	1,540 ppm
SODIUM CHLORIDE (Calc)	21,715 ppm
TOT. DISSOLVED SOLIDS:	30,562 ppm
POTASSIUM CHLORIDE:	
REMARKS	
CARBOHYDRATES .204	



ANALYST TROY HINEMAN

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL OIL WELL ☐ GAS WELL ☐ OTHER _____

2. NAME OF OPERATOR:
El Paso Production Oil & Gas Company

3. ADDRESS OF OPERATOR: 8 South 1200 East CITY Vernal STATE Utah ZIP 84078 PHONE NUMBER: 435-789-4433

4. LOCATION OF WELL

FOOTAGES AT SURFACE:

QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:

5. LEASE DESIGNATION AND SERIAL NUMBER:

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT or CA AGREEMENT NAME:

8. WELL NAME and NUMBER:

Exhibit "A"

9. API NUMBER:

10. FIELD AND POOL, OR WILDCAT:

COUNTY:

STATE:

UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

TYPE OF ACTION

☐ NOTICE OF INTENT
(Submit in Duplicate)

Approximate date work will start:

☐ SUBSEQUENT REPORT
(Submit Original Form Only)

Date of work completion:

☐ ACIDIZE

☐ ALTER CASING

☐ CASING REPAIR

☐ CHANGE TO PREVIOUS PLANS

☐ CHANGE TUBING

☐ CHANGE WELL NAME

☐ CHANGE WELL STATUS

☐ COMMINGLE PRODUCING FORMATIONS

☐ CONVERT WELL TYPE

☐ DEEPEN

☐ FRACTURE TREAT

☐ NEW CONSTRUCTION

☐ OPERATOR CHANGE

☐ PLUG AND ABANDON

☐ PLUG BACK

☐ PRODUCTION (START/RESUME)

☐ RECLAMATION OF WELL SITE

☐ RECOMPLETE - DIFFERENT FORMATION

☐ REPERFORATE CURRENT FORMATION

☐ SIDETRACK TO REPAIR WELL

☐ TEMPORARILY ABANDON

☐ TUBING REPAIR

☐ VENT OR FLARE

☐ WATER DISPOSAL

☐ WATER SHUT-OFF

☒ OTHER: Name Change

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

As a result of the merger between The Coastal Corporation and a wholly owned subsidiary of El Paso Energy Corporation, the name of Coastal Oil & Gas Corporation has been changed to El Paso Production Oil & Gas Company effective March 9, 2001.

See Exhibit "A"

Bond # 400JU0708

Coastal Oil & Gas Corporation

NAME (PLEASE PRINT) John T. Elzner

TITLE Vice President

SIGNATURE

DATE 06-15-01

El Paso Production Oil & Gas Company

NAME (PLEASE PRINT) John T. Elzner

TITLE Vice President

SIGNATURE

DATE 06-15-01

(This space for State use only)

RECEIVED

JUN 19 2001

DIVISION OF
OIL, GAS AND MINING

State of Delaware
Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "COASTAL OIL & GAS CORPORATION", CHANGING ITS NAME FROM "COASTAL OIL & GAS CORPORATION" TO "EL PASO PRODUCTION OIL & GAS COMPANY", FILED IN THIS OFFICE ON THE NINTH DAY OF MARCH, A.D. 2001, AT 11 O'CLOCK A.M.

RECEIVED

MAR 14 2001

DIVISION OF
OIL, GAS AND MINING



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

0610204 8100

AUTHENTICATION: 1061007

010162788

DATE: 04-03-01

**CERTIFICATE OF AMENDMENT
OF
CERTIFICATE OF INCORPORATION**

COASTAL OIL & GAS CORPORATION (the "Company"), a corporation organized and existing under and by virtue of the General Corporation Law of the State of Delaware, DOES HEREBY CERTIFY:

FIRST: That the Board of Directors of the Company, by the unanimous written consent of its members, filed with the minutes of the Board, adopted a resolution proposing and declaring advisable the following amendment to the Certificate of Incorporation of the Company:

RESOLVED that it is deemed advisable that the Certificate of Incorporation of this Company be amended, and that said Certificate of Incorporation be so amended, by changing the Article thereof numbered "FIRST." so that, as amended, said Article shall be and read as follows:


"FIRST. The name of the corporation is El Paso Production Oil & Gas Company."

SECOND: That in lieu of a meeting and vote of stockholders, the stockholders entitled to vote have given unanimous written consent to said amendment in accordance with the provisions of Section 228 of the General Corporation Law of the State of Delaware.

THIRD: That the aforesaid amendment was duly adopted in accordance with the applicable provisions of Sections 242 and 228 of the General Corporation Law of the State of Delaware.

IN WITNESS WHEREOF, said COASTAL OIL & GAS CORPORATION has caused this certificate to be signed on its behalf by a Vice President and attested by an Assistant Secretary, this 9th day of March 2001.

COASTAL OIL & GAS CORPORATION



David L. Siddall
Vice President

Attest:


Margaret E. Roark, Assistant Secretary

RECEIVED

STATE OF DELAWARE
SECRETARY OF STATE
DIVISION OF CORPORATIONS
FILED 11:00 AM 03/09/2001
010118394 - 0610204

JUN 19 2001

DIVISION OF
OIL, GAS AND MINING

ROUTING

OPERATOR CHANGE WORKSHEET

1. GLH		4-KAS
2. CDW	<input checked="" type="checkbox"/>	5-LP <input checked="" type="checkbox"/>
3. JLT		6-FILE

Enter date after each listed item is completed

Change of Operator (Well Sold)

Designation of Agent

Operator Name Change (Only)

X MergerThe operator of the well(s) listed below has changed, effective: **3-09-2001****FROM:** (Old Operator):COASTAL OIL & GAS CORPORATION
Address: 9 GREENWAY PLAZA STE 2721

HOUSTON, TX 77046-0995

Phone: 1-(713)-418-4635

Account N0230

TO: (New Operator):EL PASO PRODUCTION OIL & GAS COMPANY
Address: 9 GREENWAY PLAZA STE 2721 RM 2975B

HOUSTON, TX 77046-0995

Phone: 1-(832)-676-4721

Account N1845

CA No.

Unit:

WELL(S)

NAME	API NO	ENTITY NO	SEC TWN RNG	LEASE TYPE	WELL TYPE	WELL STATUS
WONSITS STATE 8-32	43-047-33681	99999	32-07S-22E	STATE	GW	APD
STATE 32 21 (CA 9C-204)	43-047-30754	120	32-08S-21E	STATE	GW	P
OURAY 32-88 (CA 9C-204)	43-047-33391	12870	32-08S-21E	STATE	GW	P
OURAY 32-89 (CA 9C-204)	43-047-33392	12754	32-08S-21E	STATE	GW	P
OURAY 32-146 (CA 9C-204)	43-047-33623	12862	32-08S-21E	STATE	GW	P
GLEN BENCH ST 12-36-8-21 (CA 9C-205)	43-047-33287	12549	36-08S-21E	STATE	GW	P
TRIBAL 31-60 (CA 84688C)	43-047-33340	12563	31-08S-22E	STATE	GW	P
STATE 31 32 (CA 84688C)	43-047-30906	175	31-08S-22E	STATE	GW	P
TRIBAL 31-98 (CA 84688C)	43-047-33375	12685	31-08S-22E	STATE	GW	P
TRIBAL 31-128 (CA 84688C)	43-047-33460	12722	31-08S-22E	STATE	GW	P
TRIBAL 31-129 (CA 84688C)	43-047-33461	12739	31-08S-22E	STATE	GW	P
TRIBAL 31-132 (CA 84688C)	43-047-33462	12776	31-08S-22E	STATE	GW	P
MORGAN STATE 1-36	43-047-30600	5445	36-09S-21E	STATE	GW	P
MORGAN STATE 2-36	43-047-32585	11927	36-09S-21E	STATE	GW	P
MORGAN STATE 3-36	43-047-32589	12002	36-09S-21E	STATE	GW	P
MORGAN STATE 4-36	43-047-32729	12068	36-09S-21E	STATE	GW	P
MORGAN STATE 5-36	43-047-32735	12069	36-09S-21E	STATE	GW	P
MORGAN STATE 15-36	43-047-33094	12384	36-09S-21E	STATE	GW	S
MORGAN STATE 16-36	43-047-33093	12407	36-09S-21E	STATE	GW	P
HELLS HOLE 9103	43-047-31870	11027	36-10S-25E	STATE	GW	P

OPERATOR CHANGES DOCUMENTATION

1. (R649-8-10) Sundry or legal documentation was received from the **FORMER** operator on: 06/19/2001
2. (R649-8-10) Sundry or legal documentation was received from the **NEW** operator on: 06/19/2001
3. The new company has been checked through the **Department of Commerce, Division of Corporations Database** on: 06/21/2001
4. Is the new operator registered in the State of Utah: YES Business Number: 608186-0143

5. If **NO**, the operator was contacted contacted on: N/A
6. **Federal and Indian Lease Wells:** The BLM and or the BIA has approved the (merger, name change, or operator change for all wells listed on Federal or Indian leases on: N/A
7. **Federal and Indian Units:** The BLM or BIA has approved the successor of unit operator for wells listed on: N/A
8. **Federal and Indian Communization Agreements ("CA"):** The BLM or the BIA has approved the operator change for all wells listed involved in a CA on: N/A
9. **Underground Injection Control ("UIC")** The Division has approved UIC Form 5, **Transfer of Authority to Inject**, for the enhanced/secondary recovery unit/project for the water disposal well(s) listed on: N/A

DATA ENTRY:

1. Changes entered in the **Oil and Gas Database** on: 07/10/2001
2. Changes have been entered on the **Monthly Operator Change Spread Sheet** on: 07/10/2001
3. Bond information entered in RBDMS on: 06/20/2001
4. Fee wells attached to bond in RBDMS on: N/A

STATE BOND VERIFICATION:

1. State well(s) covered by Bond No.: 400JU0705

FEE WELLS - BOND VERIFICATION/LEASE INTEREST OWNER NOTIFICATION:

1. (R649-3-1) The **NEW** operator of any fee well(s) listed has furnished a bond: N/A
2. The **FORMER** operator has requested a release of liability from their bond on: N/A
The Division sent response by letter on: N/A
3. (R649-2-10) The **FORMER** operator of the Fee wells has been contacted and informed by a letter from the Division of their responsibility to notify all interest owners of this change on: _____

FILMING:

1. All attachments to this form have been **MICROFILMED** on: _____

FILING:

1. **ORIGINALS/COPIES** of all attachments pertaining to each individual well have been filled in each well file on: _____

COMMENTS: Master list of all wells involved in operator change from Coastal Oil & Gas Corporation to El Paso Production Oil and Gas Company shall be retained in the "Operator Change File".

memorandum

Branch of Real Estate Services
Uintah & Ouray Agency

Date: 5 December, 2002

Reply to
Attn of: Supervisory Petroleum Engineer

Subject: Modification of Utah Division of Oil, Gas and Mining Regulations

To: Director, Utah Division of Oil, Gas and Mining Division: John Baza

We have been advised of changes occurring with the operation of your database for Change of Operator. You will be modifying your records to reflect Change of Operator once you have received all necessary documentation from the companies involved, and perhaps in advance of our Notice of Concurrence/Approval of Change of Operator where Indian leases are involved.

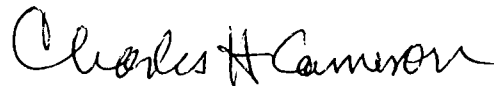
We have no objection.

With further comment to Rulemaking, I wish to comment concerning the provision of Exhibits for upcoming Hearings. I would like to see the Uintah & Ouray Agency, BIA, and the Ute Indian Tribe, Energy & Mineral Resources Department added to the list of those parties that receive advance Exhibits so as to allow us to have research time prior to Hearing dates. We will be able to provide a more informed recommendation to the Oil, Gas and Mining Board. It would be best if we would receive only those Exhibits that concern Indian lands, specifically on or adjacent to Indian lands. This may be a difficult situation to attain, as it is not always clear where 'on or adjacent' occurs.

I am aware that you have gone to extra effort to correct this matter already, and I fully appreciate it. My request is intended only to allow the addition of Uintah & Ouray Agency and Ute Indian Tribe to the official listing.

We appreciate your concern, and hope that these comments are timely enough for consideration in the revision process.

CC: Minerals & Mining Section of RES
Ute Energy & Mineral Resources Department: Executive Director
chronos



JAN. 17. 2003 3:34PM

STPORT

NO. 173

P. 2

**WESTPORT OIL AND GAS COMPANY, L.P.**

410 Seventeenth Street #2300 Denver Colorado 80202-4436
Telephone: 303 573 5404 Fax: 303 573 5409

February 1, 2002

Department of the Interior
Bureau of Land Management
2850 Youngfield Street
Lakewood, CO 80215-7093
Attention: Ms. Martha Maxwell

**RE: BLM Bond CO-1203
BLM Nationwide Bond 158626364
Surety - Continental Casualty Company
Belco Energy Corporation merger into Westport Oil and Gas Company, Inc.
Conversion of Westport Oil and Gas Company, Inc., into Westport Oil and Gas Company, L.P.
Assumption Rider - Westport Oil and Gas Company, L.P.**

Dear Ms. Maxwell:

Pursuant to our recent conversations, please find the following list of enclosures for the BLM's consideration and approval:

Two (2) Assumption Riders, fully executed originals.
Copies of Belco Energy Corporation merger into Westport Oil and Gas Company, Inc.
Copies of Westport Oil and Gas Company, Inc., conversion into Westport Oil and Gas Company, L.P.
List of all Federal/BIA/State Leases - Belco/Westport's leases - in all states.

Please inform us of any additional information needed to complete the change to Westport Oil and Gas Company, L.P., as operator of record.

I thank you for your assistance and cooperation in this matter. Please do not hesitate contacting the undersigned, should a question arise.

Sincerely,
Westport Oil and Gas Company, L.P.

Debby J. Black
Engineer Technician

Encl;



United States Department of the Interior **RECEIVED**

BUREAU OF LAND MANAGEMENT

Utah State Office
P.O. Box 45155
Salt Lake City, UT 84145-0155

FEB 22 2002

DIVISION OF
OIL, GAS AND MINING

In Reply Refer To:

3106

UTU-25566 et al

(UT-924)

FEB 21 2002

NOTICE

Westport Oil and Gas Company L.P. : Oil and Gas
410 Seventeenth Street, #2300 :
Denver Colorado 80215-7093 :

Name Change Recognized

Acceptable evidence has been received in this office concerning the name change of Westport Oil and Gas Company, Inc. into Westport Oil and Gas Company, L.P. with Westport Oil and Gas Company, L.P. being the surviving entity.

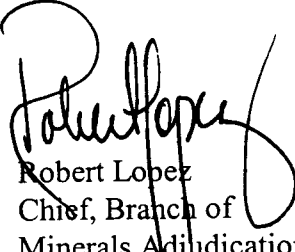
For our purposes, the name change is recognized effective December 31, 2001.

The oil and gas lease files identified have been noted as to the name change. The exhibit was compiled from a list of leases obtained from our computer program. We have not abstracted the lease files to determine if the entities affected by this name change hold an interest in the leases identified nor have we attempted to identify leases where the entities are the operator on the ground maintaining no vested recorded title or operating rights interests. We will be notifying the Minerals Management Service and all applicable Bureau of Land Management offices of the change by a copy of this notice. If additional documentation for changes of operator are required by our Field Offices, you will be contacted by them.

If you identify additional leases in which the entities maintain an interest, please contact this office and we will appropriately document those files with a copy of this Notice.

Due to the name change, the name of the principal/obligor on the bond is required to be changed from Westport Oil and Gas Company, Inc. to Westport Oil and Gas Company, L.P.. You may accomplish this either by consent of surety rider on the original bond or a rider to the original bond. The bonds are held in Colorado.

UTU-03405
UTU-20895
UTU-25566
UTU-43156
UTU-49518
UTU-49519
UTU-49522
UTU-49523



Robert Lopez
Chief, Branch of
Minerals Adjudication

cc: Moab Field Office
Vernal Field Office
MMS, Reference Data Branch, MS3130, PO Box 5860, Denver CO 80217
State of Utah, DOGM, Attn: Jim Thompson (Ste. 1210), Box 145801, SLC UT 84114
Teresa Thompson (UT-922)
Joe Incardine (UT-921)



United States Department of the Interior

BUREAU OF INDIAN AFFAIRS

Washington, D.C. 20240

FEB 10 2003

IN REPLY REFER TO:

Real Estate Services

Carroll A. Wilson
Principal Landman
Westport Oil and Gas Company, L.P.
1368 South 1200 East
Vernal, Utah 84078

Dear Mr. Wilson:

This is in response to your request for approval of RLI Insurance Company's Nationwide Oil and Gas Lease Bond No. RLB0005239 executed effective December 17, 2002, (\$150,000 coverage) with Westport Oil and Gas Company, L. P., as principal.

This bond is hereby approved as of the date of this correspondence and will be retained in the Bureau of Indian Affairs' Division of Real Estate Services, 1849 C Street, NW, MS-4512-MIB, Washington, D.C. 20240. All Bureau oil and gas regional offices and the surety are being informed of this action.

In cases where you have existing individual and/or collective bonds on file with one or more of our regional offices, you may now request those offices, directly, to terminate in lieu of coverage under this Nationwide Bond.

Enclosed is a copy of the approved bond for your files. If we may be of further assistance in this matter, please advise.

Sincerely,

Director, Office of Trust Responsibilities

ACTING

Enclosure

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

5. LEASE DESIGNATION AND SERIAL NUMBER:

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT or CA AGREEMENT NAME:

8. WELL NAME and NUMBER:

Exhibit "A"

9. API NUMBER:

10. FIELD AND POOL, OR WILDCAT:

1. TYPE OF WELL

OIL WELL ☐

GAS WELL ☐

OTHER

2. NAME OF OPERATOR:

El Paso Production Oil & Gas Company

3. ADDRESS OF OPERATOR:

9 Greenway Plaza

CITY

Houston

STATE

TX

ZIP

77064-0995

PHONE NUMBER:

(832) 676-5933

4. LOCATION OF WELL

FOOTAGES AT SURFACE:

COUNTY:

QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:

STATE:

UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

TYPE OF ACTION

☐ NOTICE OF INTENT
(Submit in Duplicate)

Approximate date work will start:

☐ SUBSEQUENT REPORT
(Submit Original Form Only)

Date of work completion:

☐ ACIDIZE

☐ ALTER CASING

☐ CASING REPAIR

☐ CHANGE TO PREVIOUS PLANS

☐ CHANGE TUBING

☐ CHANGE WELL NAME

☐ CHANGE WELL STATUS

☐ COMMINGLE PRODUCING FORMATIONS

☐ CONVERT WELL TYPE

☐ DEEPEN

☐ FRACTURE TREAT

☐ NEW CONSTRUCTION

☒ OPERATOR CHANGE

☐ PLUG AND ABANDON

☐ PLUG BACK

☐ PRODUCTION (START/RESUME)

☐ RECLAMATION OF WELL SITE

☐ RECOMPLETE - DIFFERENT FORMATION

☐ REPERFORATE CURRENT FORMATION

☐ SIDETRACK TO REPAIR WELL

☐ TEMPORARILY ABANDON

☐ TUBING REPAIR

☐ VENT OR FLARE

☐ WATER DISPOSAL

☐ WATER SHUT-OFF

☐ OTHER:

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Operator change to Westport Oil and Gas Company, L.P., 1670 Broadway, Suite 2800, Denver, CO. 80202-4800, effective December 17, 2002.

BOND #

State Surety Bond No. RLB0005236

Fee Bond No. RLB0005238

EL PASO PRODUCTION OIL & GAS COMPANY

By:

Jon R. Nelsen, Attorney-in-Fact

RECEIVED

FEB 28 2003

DIV. OF OIL, GAS & MINING

WESTPORT OIL AND GAS COMPANY, L.P.

NAME (PLEASE PRINT) David R. Dix

TITLE Agent and Attorney-in-Fact

SIGNATURE

DATE

12/17/02

(This space for State use only)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

WESTPORT OIL & GAS COMPANY, L.P.

3a. Address

P.O. BOX 1148 VERNAL, UT 84078

3b. Phone No. (Include area code)

(435) 781-7023

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SEE ATTACHED EXHIBIT "A"

5. Lease Serial No.

SEE ATTACHED EXHIBIT "A"

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

SEE ATTACHED EXHIBIT "A"

9. API Well No.

SEE ATTACHED EXHIBIT "A"

10. Field and Pool, or Exploratory Area

11. County or Parish, State

UINTAH COUNTY, UT

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	SUCCESSOR OF
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	OPERATOR

13. Describe Proposed or Completed Operations (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed if testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator determined that the site is ready for final inspection.

WESTPORT OIL & GAS COMPANY, L.P., IS CONSIDERED TO BE THE OPERATOR ON THE ATTACHED DESCRIBED LANDS AND IS RESPONSIBLE UNDER THE TERMS AND CONDITIONS OF THE LEASE FOR THE OPERATIONS CONDUCTED ON THE LEASED LANDS OR PORTIONS THEREOF, BOND COVERAGE FOR THIS WELL IS PROVIDED BY FEDERAL NATIONWIDE BOND NO. 158626364, EFFECTIVE FEBRUARY 1, 2002, AND BIA NATIONWIDE BOND NO. RLB0005239, EFFECTIVE FEBRUARY 10, 2003.

RECEIVED

MAR 04 2003

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed)

CHERYL CAMERON

Title

OPERATIONS

Date

March 4, 2003

THIS SPACE FOR FEDERAL OR STATE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on reverse)

ROUTING

OPERATOR CHANGE WORKSHEET

1. GLH

2. CDW/

3. FILE

X Change of Operator (Well Sold)

Designation of Agent/Operator

Operator Name Change

Merger

The operator of the well(s) listed below has changed, effective: **12-17-02****FROM:** (Old Operator):

EL PASO PRODUCTION OIL & GAS COMPANY

Address: 9 GREENWAY PLAZA

HOUSTON, TX 77064-0995

Phone: 1-(832)-676-5933

Account No. N1845

TO: (New Operator):

WESTPORT OIL & GAS COMPANY LP

Address: P O BOX 1148

VERNAL, UT 84078

Phone: 1-(435)-781-7023

Account No. N2115

CA No.

Unit:

WELL(S)

NAME	SEC TWN RNG	API NO	ENTITY NO	LEASE TYPE	WELL TYPE	WELL STATUS
OURAY 6-66 (CR-144)	06-09S-21E	43-047-33284	12544	INDIAN	GW	P
OURAY 6-71 (CR-144)	06-09S-21E	43-047-33285	12552	INDIAN	GW	P
OURAY 6-73	06-09S-21E	43-047-33286	12681	INDIAN	GW	P
OURAY 6-82 (CR-144)	06-09S-21E	43-047-33309	12559	INDIAN	GW	P
OURAY 6-84	06-09S-21E	43-047-34026	99999	INDIAN	GW	APD
OURAY 6-166	06-09S-21E	43-047-33999	99999	INDIAN	GW	APD
OURAY 6-225	06-09S-21E	43-047-34741	99999	INDIAN	GW	APD
OURAY 6-194	06-09S-21E	43-047-34049	99999	INDIAN	GW	APD
PINNACOOSE 6 3	06-09S-21E	43-047-30428	55	INDIAN	GW	P
NBU 11	14-09S-21E	43-047-30118	9240	FEDERAL	GW	PA
CIGE 215X	15-09S-21E	43-047-33690	12996	FEDERAL	GW	P
UTE TRAIL U 13	15-09S-21E	43-047-15385	99998	FEDERAL	GW	PA
COG 6-18-9-21 GR	18-09S-21E	43-047-32513	11655	FEDERAL	GW	P
COG 8-19-9-21 GR	19-09S-21E	43-047-32469	11652	FEDERAL	GW	P
NBU CIGE 6-19-9-21	19-09S-21E	43-047-30356	11618	FEDERAL	GW	P
HORSESHOE BEND FED 26-3	26-09S-21E	43-047-33872	13128	FEDERAL	GW	S
COG NBU 10-30-9-21 GR	30-09S-21E	43-047-32470	11633	FEDERAL	GW	P
UTE TRAIL U ST 10	34-09S-21E	43-047-15382	99998	FEDERAL	GW	PA
MORGAN STATE 1-36	36-09S-21E	43-047-30600	5445	STATE	GW	P
MORGAN STATE 2-36	36-09S-21E	43-047-32585	11927	STATE	GW	P

OPERATOR CHANGES DOCUMENTATION

Enter date after each listed item is completed

1. (R649-8-10) Sundry or legal documentation was received from the **FORMER** operator on: 02/28/2003
2. (R649-8-10) Sundry or legal documentation was received from the **NEW** operator on: 03/04/2003
3. The new company has been checked through the Department of Commerce, Division of Corporations Database on: 03/06/2003
4. Is the new operator registered in the State of Utah: YES Business Number: 1355743-0181
5. If **NO**, the operator was contacted on: _____

6. (R649-9-2) Waste Management Plan has been received on: IN PLACE

7. **Federal and Indian Lease Wells:** The BLM and or the BIA has approved the merger, name change, or operator change for all wells listed on Federal or Indian leases on: BLM-12/31/2003 BIA-12/5/02

8. **Federal and Indian Units:**

The BLM or BIA has approved the successor of unit operator for wells listed on: 02/27/2003

9. **Federal and Indian Communization Agreements ("CA"):**

The BLM or BIA has approved the operator for all wells listed within a CA on: 01/09/2003

10. **Underground Injection Control ("UIC")** The Division has approved UIC Form 5, **Transfer of Authority to Inject**, for the enhanced/secondary recovery unit/project for the water disposal well(s) listed on: N/A

DATA ENTRY:

1. Changes entered in the Oil and Gas Database on: 03/27/2003

2. Changes have been entered on the Monthly Operator Change Spread Sheet on: 03/27/2003

3. Bond information entered in RBDMS on: N/A

4. Fee wells attached to bond in RBDMS on: N/A

STATE WELL(S) BOND VERIFICATION:

1. State well(s) covered by Bond Number: RLB 0005236

FEDERAL WELL(S) BOND VERIFICATION:

1. Federal well(s) covered by Bond Number: 158626364

INDIAN WELL(S) BOND VERIFICATION:

1. Indian well(s) covered by Bond Number: RLB 0005239

FEE WELL(S) BOND VERIFICATION:

1. (R649-3-1) The **NEW** operator of any fee well(s) listed covered by Bond Number RLB 0005238

2. The **FORMER** operator has requested a release of liability from their bond on: N/A
The Division sent response by letter on: N/A

LEASE INTEREST OWNER NOTIFICATION:

3. (R649-2-10) The **FORMER** operator of the fee wells has been contacted and informed by a letter from the Division of their responsibility to notify all interest owners of this change on: N/A

COMMENTS:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, deepen existing wells, or to reenter plugged and abandoned wells. Use APPLICATION FOR PERMIT – for such proposals		6. Lease Designation and Serial Number MULTIPLE WELLS- SEE ATTACHED
		7. Indian Allottee or Tribe Name
		8. Unit or Communitization Agreement MULTIPLE WELLS- SEE ATTACHED
		9. Well Name and Number MULTIPLE WELLS- SEE ATTACHED
1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other (specify)		10. API Well Number MULTIPLE WELLS- SEE ATTACHED
2. Name of Operator WESTPORT OIL & GAS COMPANY, L.P.		11. Field and Pool, or Wildcat MULTIPLE WELLS- SEE ATTACHED
3. Address of Operator 1368 SOUTH 1200 EAST, VERNAL, UTAH 84078	4. Telephone Number 435-781-7060	
5. Location of Well Footage : MULTIPLE WELLS- SEE ATTACHED County : UINTAH QQ, Sec, T., R., M : MULTIPLE WELLS- SEE ATTACHED State : UTAH		
12. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		

NOTICE OF INTENT
(Submit in Duplicate)

<input type="checkbox"/> Abandonment	<input type="checkbox"/> New Construction
<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Pull or Alter Casing
<input type="checkbox"/> Change of Plans	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Conversion to Injection	<input type="checkbox"/> Shoot or Acidize
<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Vent or Flare
<input type="checkbox"/> Multiple Completion	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Other <u>VARIANCE</u>	

SUBSEQUENT REPORT
(Submit Original Form Only)

<input type="checkbox"/> Abandonment *	<input type="checkbox"/> New Construction
<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Pull or Alter Casing
<input type="checkbox"/> Change of Plans	<input type="checkbox"/> Shoot or Acidize
<input type="checkbox"/> Conversion to Injection	<input type="checkbox"/> Vent or Flare
<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Other _____	

Date of Work Completion _____

Report results of Multiple Completions and Recompletions to different reservoirs on WELL COMPLETION OR RECOMPLETION AND LOG form.
 * Must be accompanied by a cement verification report.

13. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Westport Oil & Gas requests a variance to Onshore Order No. 4, Part III C. a. requiring each sales tank be equipped with a pressure-vacuum thief hatch and/or vent line valve. The variance is requested as an economic analysis shows the value of the shrunk condensate will not payout the incremental cost of purchasing and maintaining the valve resulting in a loss of value over the producing life of the well.

The volume lost to shrinkage by dropping the tank pressure from 6 ozs. to 0 psig is shown to be 0.3% of the tank volume. This was determined by lab analysis of a representative sample from the field. The sample shrunk from 98.82% of original volume to 98.52% when the pressure was dropped. The average well produces approximately 6 bbls condensate per month. The resulting shrinkage would amount to 0.56 bbls per month lost volume due to shrinkage. The value of the shrunk and lost condensate does not recoup or payout the cost of installing and maintaining the valves and other devices that hold the positive tank pressure. An economic run based on the loss and costs is attached. Westport Oil & Gas requests approval of this variance in order to increase the value of the well to the operator and the mineral royalty owners.

14. I hereby certify that the foregoing is true and correct.

Name & Signature Debra Domenici Title Environmental Assistant Date 07/12/04
 (State Use Only) Accepted by the
Utah Division of

Date: 7/15/04

By: [Signature]

See Instructions on Reverse Side

Federal Approval Of This
Action Is Necessary

RECEIVED

JUL 14 2004

DIV. OF OIL, GAS & MINING

Westport Oil & Gas, L.P.

Project Economics Worksheet

Instructions:

Fill in blue boxed areas with before and after project data. The evaluation result, are shown below and graphed automatically at the bottom of the page. This sheet is protected to prevent accidental alteration of the formulas. See JTC for changes. OPX entered as annual costs and/or as unit OPX costs for \$/BF and \$/MCF

Project Name:

Condensate Shrinkage Economics

Is this job a well pull or production rig job ??? ☐ N (Y or N)

	BEFORE \$/Year	AFTER \$/Year	DIFFERENCE \$/Year
Gross Oil Revenue	\$1,088	\$1,099	\$11
Gross Gas Revenue	\$0	\$0	\$0
NGL Revenue	\$0	\$0	\$0
PULING UNIT SERVICE			\$0
WIRELINE SERVICE			\$0
SUBSURF EQUIP REPAIRS			\$0
COMPANY LABOR			\$0
CONTRACT LABOR	\$0	\$200	\$200
CONTR SERVICE			\$0
LEASE FUEL GAS	\$0	\$0	\$0
UTILITIES - ELECTRICITY	\$0	\$0	\$0
CHEMICAL TREATING			\$0
MATERIAL & SUPPLY	\$0	\$150	\$150
WATER & HAULING			\$0
ADMINISTRATIVE COSTS			\$0
GAS PLANT PROCESSING			\$0
Totals	\$0	\$350	\$350

Increased OPX Per Year

Investment Breakdown:

	Cap/Exp Code	Cost, \$
Capital \$	820/830/840	\$1,200
Expense \$	830/860	\$0
Total \$		\$1,200

Oil Price	\$ 23.00	\$/BO
Gas Price	\$ 3.10	\$/MCF
Electric Cost	\$ -	\$/ HP / day
OPX/BF	\$ 2.00	\$/BF
OPX/MCF	\$ 0.62	\$/MCF

Production & OPX Detail:

	Before		After		Difference	
Oil Production	0.192	BOPD	0.194	BOPD	0.002	BOPD
Gas Production	0	MCFPD	0	MCFPD	0	MCFPD
Wtr Production	0	BWPD	0	BWPD	0	BWPD
Horse Power		HP		HP	0	HP
Fuel Gas Burned		MCFPD		MCFPD	0	MCFPD

Project Life:

Life = 20.0 Years
(Life no longer than 20 years)

Internal Rate of Return:

After Tax IROR = #DIV/0!

AT Cum Cashflow:

Operating Cashflow = (\$2,917) (Discounted @ 10%)

Payout Calculation:

Payout = $\frac{\text{Total Investment}}{\text{Sum(OPX + Incremental Revenue)}}$ = 1

Payout occurs when total AT cashflow equals investment
See graph below, note years when cashflow reaches zero

Payout = NEVER Years or #VALUE! Days

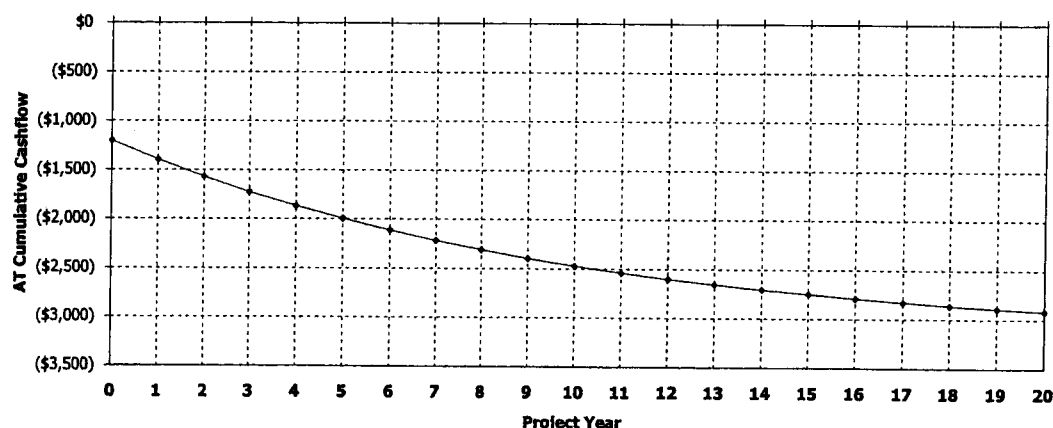
Gross Reserves:

Oil Reserves = 6 BO
Gas Reserves = 0 MCF
Gas Equiv Reserves = 38 MCFE

Notes/Assumptions:

An average NBU well produces 0.192 Bcpd with no tank pressure. The production is increased to 0.194 Bcpd if 6 ozs of pressure are placed on the tank. The increased production does not payout the valve cost or the estimated annual maintenance costs.

Project: Condensate Shrinkage Economics



Westport Oil and Gas, Inc.

NBU/Ouray Field

RFL 2003-022

COMPARISON OF FLASH BACK PRESSURES

Calculated by Characterized Equation-of-State

Flash Conditions		Gas/Oil Ratio (scf/STbbl) (A)	Specific Gravity of Flashed Gas (Air=1.000)	Separator Volume Factor (B)	Separator Volume Percent (C)
psig	°F				

Calculated at Laboratory Flash Conditions

80	70			1.019	
0	122	30.4	0.993	1.033	101.37%
0	60	0.0	—	1.000	98.14%

Calculated Flash with Backpressure using Tuned EOS

80	70			1.015	
6.0 oz	65	24.6	0.777	1.003	98.82%
0	60	0.0	—	1.000	98.52%
80	70			1.015	
4.0 oz	65	24.7	0.778	1.003	98.82%
0	60	0.0	—	1.000	98.52%
80	70			1.015	
2.0 oz	65	24.7	0.779	1.003	98.82%
0	60	0.0	—	1.000	98.52%
80	70			1.015	
0	65	24.8	0.780	1.003	98.82%
0	60	0.0	—	1.000	98.52%

(A) Cubic Feet of gas at 14.696 psia and 60 °F per Barrel of Stock Tank Oil at 60 °F.

(B) Barrels of oil at indicated pressure and temperature per Barrel of Stock Tank Oil at 60 °F.

(C) Oil volume at indicated pressure and temperature as a percentage of original saturated oil volume.

Note: Bubblepoint of sample in original sample container was 80 psig at 70° F with 1 cc water

WELL	LEGALS	STF LEASE NO	CA NUMBER	API NO
ARCHY BENCH STATE 1-2	NENE SEC 2, T11S, R22E	ML22348A		4304731489
BAYLESS STATE 02-01	SWSE SEC 2, T9S, R20E	ML47044		4304734540
BONANZA 1023-2A	NENE SEC. 2, T10S, R23E	ML47062		4304735347
BONANZA 1023-2C	NENW SEC. 2, T10S, R23E	ML47062		4304735346
BONANZA 1023-2E	SWNW SEC. 2, T10S, R23E	ML47062		4304735345
KENNEDY WASH STATE 16-1	NWNW SEC 16, T8S, R23E	ML47212		4304733589
MORGAN STATE 01-36	SENW SEC 36, T9S, R21E	ML22265		4304730600
MORGAN STATE 02-36	NWNE SEC 36, T9S, R21E	ML22265		4304732585
MORGAN STATE 03-36	NWNE SEC 36, T9S, R21E	ML22265		4304732589
MORGAN STATE 04-36	NWSW SEC 36, T9S, R21E	ML22265		4304732729
MORGAN STATE 05-36	NWSE SEC 36, T9S, R21E	ML22265		4304732735
MORGAN STATE 06-36	SWNW SEC 36, T9S, R21E	ML22265		4304732810
MORGAN STATE 07-36	NENW SEC 36, T9S, R21E	ML22265		4304732811
MORGAN STATE 08-36	NENE SEC 36, T9S, R21E	ML22265		4304732812
MORGAN STATE 09-36	SWNE SEC 36, T9S, R21E	ML22265		4304732815
MORGAN STATE 10-36	SENE SEC 36, T9S, R21E	ML22265		4304732816
MORGAN STATE 11-36	NESW SEC 36, T9S, R21E	ML22265		4304732813
MORGAN STATE 12-36	NESE SEC 36, T9S, R21E	ML22265		4304732814
MORGAN STATE 13-36	SESE SEC 36, T9S, R21E	ML22265		4304732817
MORGAN STATE 14-36	SWSW SEC 36, T9S, R21E	ML22265		4304733092
MORGAN STATE 15-36	SESW SEC 36, T9S, R21E	ML22265		4304733094
MORGAN STATE 16-36	SWSE SEC 36, T9S, R21E	ML22265		4304733093
STATE 01-32	NESW SEC 32, T10S, R22E	ML22798	891008900A	4304734317
STATE 02-32	SESW SEC 32, T10S, R22E	ML22798		4304734831
STATE 03-32	NWSW SEC 32, T10S, R22E	ML22798		4304734832
STATE 1022-32A	NENE SEC. 32, T10S, R22E	ML22798		4304735096
STATE 1022-32J	NWSE SEC 32, T10S, R22E	ML22798		4304735095
STATE 1022-32M	SWSW SEC 32, T10S, R22E	ML-22798		
STATE 1022-32O	SWSE SEC. 32, T10S, R22E	ML22798		4304735315
STATE 11-36	NESW SEC 36, T8S, R21E	ML22051	9C-205	4304734505
STATE 14-16	SWSW SEC 16, T7S, R21E	ML40904		4304731417
STATE 31-32	SESE SEC 31, T8S, R22E	ML28048	VR49I-84688C	4304730906
STATE 32-21	NESE SEC 32, T8S, R21E	ML22052	9C-204	4304730754
STIRRUP STATE 32-1	NWNE SEC 32, T6S, R21E	ML22036	UTU76783X	4304731557
STIRRUP STATE 32-1-J	NWSE SEC 32, T6S, R21E	ML40226		4304731646
STIRRUP STATE 32-2	SENE SEC 32, T6S, R21E	ML22036	UTU76783X	4304731626
STIRRUP STATE 32-6 SWD	NENE SEC 32, T6S, R21E	ML22036	UTU76783X	4304732784
UTE TRIBAL 31-060	NESW SEC 31, T8S, R22E	ML28048	VR49I-84688C	4304733340
WONSITS STATE 01-32	SWNE SEC 32, T7S, R22E	ML47780		4304732820
WONSITS STATE 02-32	SWSE SEC 32, T7S, R22E	ML47780		4304732819
WONSITS STATE 05-32	SENE SEC 32, T7S, R22E	ML47780		4304733678
WONSITS STATE 09-32	NESW SEC 32, T7S, R22E	ML47780		4304734060

Division of Oil, Gas and Mining
OPERATOR CHANGE WORKSHEET

ROUTING

1. DJJ

2. CDW

X Change of Operator (Well Sold)

Operator Name Change/Merger

The operator of the well(s) listed below has changed, effective:

1/6/2006

FROM: (Old Operator):

N2115-Westport Oil & Gas Co., LP

1368 South 1200 East

Vernal, UT 84078

Phone: 1-(435) 781-7024

TO: (New Operator):

N2995-Kerr-McGee Oil & Gas Onshore, LP

1368 South 1200 East

Vernal, UT 84078

Phone: 1-(435) 781-7024

CA No.		Unit:				
WELL NAME	SEC TWN RNG	API NO	ENTITY NO	LEASE TYPE	WELL TYPE	WELL STATUS

OPERATOR CHANGES DOCUMENTATION

Enter date after each listed item is completed

- (R649-8-10) Sundry or legal documentation was received from the **FORMER** operator on: 5/10/2006
- (R649-8-10) Sundry or legal documentation was received from the **NEW** operator on: 5/10/2006
- The new company was checked on the **Department of Commerce, Division of Corporations Database** on: 3/7/2006
- a. Is the new operator registered in the State of Utah: YES Business Number: 1355743-0181
- b. If **NO**, the operator was contacted on: _____
- 5a. (R649-9-2)Waste Management Plan has been received on: IN PLACE
- 5b. Inspections of LA PA state/fee well sites complete on: n/a
- 5c. Reports current for Production/Disposition & Sundries on: ok
- 6. Federal and Indian Lease Wells:** The BLM and or the BIA has approved the merger, name change, or operator change for all wells listed on Federal or Indian leases on: BLM 3/27/2006 BIA not yet
- 7. Federal and Indian Units:**
The BLM or BIA has approved the successor of unit operator for wells listed on: 3/27/2006
- 8. Federal and Indian Communization Agreements ("CA"):**
The BLM or BIA has approved the operator for all wells listed within a CA on: n/a
- 9. Underground Injection Control ("UIC")** The Division has approved UIC Form 5, **Transfer of Authority to Inject**, for the enhanced/secondary recovery unit/project for the water disposal well(s) listed on: _____

DATA ENTRY:

- Changes entered in the **Oil and Gas Database** on: 5/15/2006
- Changes have been entered on the **Monthly Operator Change Spread Sheet** on: 5/15/2006
- Bond information entered in RBDMS on: 5/15/2006
- Fee/State wells attached to bond in RBDMS on: 5/16/2006
- Injection Projects to new operator in RBDMS on: _____
- Receipt of Acceptance of Drilling Procedures for APD/New on: n/a Name Change Only

BOND VERIFICATION:

- Federal well(s) covered by Bond Number: CO1203
- Indian well(s) covered by Bond Number: RLB0005239
- (R649-3-1) The **NEW** operator of any fee well(s) listed covered by Bond Number RLB0005236
- a. The **FORMER** operator has requested a release of liability from their bond on: n/a rider added KMG
The Division sent response by letter on: _____

LEASE INTEREST OWNER NOTIFICATION:

- (R649-2-10) The **FORMER** operator of the fee wells has been contacted and informed by a letter from the Division of their responsibility to notify all interest owners of this change on: 5/16/2006

COMMENTS:

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

KERR-McGEE OIL & GAS ONSHORE LP

3a. Address

1368 SOUTH 1200 EAST VERNAL, UT 84078

3b. Phone No. (include area code)

(435) 781-7024

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SEE ATTACHED

5. Lease Serial No.

MULTIPLE LEASES

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

MUTIPLE WELLS

9. API Well No.

10. Field and Pool, or Exploratory Area

11. County or Parish, State

UINTAH COUNTY, UTAH

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other CHANGE OF OPERATOR
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operations (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.

PLEASE BE ADVISED THAT KERR-McGEE OIL & GAS ONSHORE LP, IS CONSIDERED TO BE THE OPERATOR OF THE ATTACHED WELL LOCATIONS. EFFECTIVE JANUARY 6, 2006.
KERR-McGEE OIL & GAS ONSHORE LP, IS RESPONSIBLE UNDER TERMS AND CONDITIONS OF THE LEASE(S) FOR THE OPERATIONS CONDUCTED UPON LEASE LANDS. BOND COVERAGE IS PROVIDED BY STATE OF UTAH NATIONWIDE BOND NO. RLB0005237.

RECEIVED

MAY 10 2006

DIV. OF OIL, GAS & MINING

BLM BOND = C01203

BIA BOND = RLB0005239

APPROVED 5/16/06

Earlene Russell

**Division of Oil, Gas and Mining
Earlene Russell, Engineering Technician**

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed)

RANDY BAYNE

Signature

Randy Bayne

Title

DRILLING MANAGER

Date

May 9, 2006

THIS SPACE FOR FEDERAL OR STATE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on reverse)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

WESTPORT OIL & GAS COMPANY L.P.

3a. Address

1368 SOUTH 1200 EAST VERNAL, UT 84078

3b. Phone No. (include area code)

(435) 781-7024

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SEE ATTACHED

5. Lease Serial No.

MULTIPLE LEASES

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

MUTIPLE WELLS

9. API Well No.

10. Field and Pool, or Exploratory Area

11. County or Parish, State

UINTAH COUNTY, UTAH

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other CHANGE OF OPERATOR
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operations (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.

EFFECTIVE JANUARY 6, 2006, WESTPORT OIL & GAS COMPANY L.P., HAS RELINQUISHED THE OPERATORSHIP OF THE ATTACHED WELL LOCATIONS TO KERR-McGEE OIL & GAS ONSHORE LP.

APPROVED 5/16/06
Earlene Russell
Division of Oil, Gas and Mining
Earlene Russell, Engineering Technician

RECEIVED
MAY 10 2006

DIV. OF OIL, GAS & MINING

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed)

BRAD LANEY

Signature

Title

ENGINEERING SPECIALIST

Date

May 9, 2006

THIS SPACE FOR FEDERAL OR STATE USE

Approved by

Brad Laney

Title

Date

5-9-06

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on reverse)

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

5. LEASE DESIGNATION AND SERIAL NUMBER:

ML-22265

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT or CA AGREEMENT NAME:

8. WELL NAME and NUMBER:

MORGAN STATE 1-36

9. API NUMBER:

4304730600

10. FIELD AND POOL, OR WILDCAT:

NATURAL BUTTES

1. TYPE OF WELL

OIL WELL ☐

GAS WELL ☒

OTHER _____

2. NAME OF OPERATOR:

KERR MCGEE OIL & GAS ONSHORE LP

3. ADDRESS OF OPERATOR:

1368 SOUTH 1200 EAST CITY VERNAL STATE UT ZIP 84078

PHONE NUMBER:

(435) 781-7024

4. LOCATION OF WELL

FOOTAGES AT SURFACE: **2215'FNL, 1876'FWL**

COUNTY: **UINTAH**

QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: **SENW 36 9S 21E**

STATE:

UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

TYPE OF ACTION

☒ NOTICE OF INTENT
(Submit in Duplicate)

Approximate date work will start:

☐ SUBSEQUENT REPORT
(Submit Original Form Only)

Date of work completion:

☐ ACIDIZE

☐ ALTER CASING

☐ CASING REPAIR

☐ CHANGE TO PREVIOUS PLANS

☐ CHANGE TUBING

☐ CHANGE WELL NAME

☐ CHANGE WELL STATUS

☐ COMMINGLE PRODUCING FORMATIONS

☐ CONVERT WELL TYPE

☐ DEEPEN

☐ FRACTURE TREAT

☐ NEW CONSTRUCTION

☐ OPERATOR CHANGE

☐ PLUG AND ABANDON

☐ PLUG BACK

☐ PRODUCTION (START/RESUME)

☐ RECLAMATION OF WELL SITE

☐ RECOMPLETE - DIFFERENT FORMATION

☐ REPERFORATE CURRENT FORMATION

☐ SIDETRACK TO REPAIR WELL

☐ TEMPORARILY ABANDON

☐ TUBING REPAIR

☐ VENT OR FLARE

☐ WATER DISPOSAL

☐ WATER SHUT-OFF

☒ OTHER: **SHUT IN**

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The operator requests authorization to shut-in the subject well location. Gross production from the greater Natural Buttes area is currently constrained at roughly 215mmcf/d due to lack of export pipeline capacity. The field is capable of producing more gas than this, which results in frequent and widespread bottlenecked areas of high line pressure. This in turn causes numerous wells to log off of production, often requiring swab rigs to get them going again. Operating the field in this reactionary manner is very inefficient. The operator requests authorization to shut in wells strategically to alleviate this situation and utilize the resource more efficiently. A significant drop in production is not expected, as the field is constrained anyway. The subject well was selected on the basis of one or more of the following factors:

*Located in a bottlenecked area; *High intervention requirement relative to gas production, *High water production

Wells will be shut in for an indefinite period. As the constrained situation continues, different wells will be selected and subject wells will be returned to production in order to cycle the shut-ins around the field and allow well pressures to build up and assist with future production.

RECEIVED

NOV 07 2006

DIV. OF OIL, GAS & MINING

NAME (PLEASE PRINT)

SHEILA UPCHEGO

TITLE

REGULATORY ANALYST

SIGNATURE

DATE

11/3/2006

(This space for State use only)

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS <small>Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.</small>		5. LEASE DESIGNATION AND SERIAL NUMBER: ML-22265
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
		7. UNIT or CA AGREEMENT NAME:
1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER _____		8. WELL NAME and NUMBER: MORGAN STATE 1-36
2. NAME OF OPERATOR: KERR MCGEE OIL & GAS ONSHORE LP		9. API NUMBER: 4304730600
3. ADDRESS OF OPERATOR: 1368 SOUTH 1200 EAST CITY VERNAL STATE UT ZIP 84078	PHONE NUMBER: (435) 781-7024	10. FIELD AND POOL, OR WILDCAT: NATURAL BUTTES
4. LOCATION OF WELL		
FOOTAGES AT SURFACE: 2215'FNL, 1876'FWL		COUNTY: UINTAH
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: SENW 36 9S 21E		STATE: UTAH

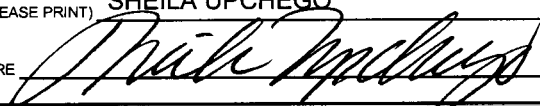
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			
TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____ <input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: _____	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input checked="" type="checkbox"/> OTHER: SHUT IN
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The operator requests authorization to shut-in the subject well location. Gross production from the greater Natural Buttes area is currently constrained at roughly 215mmcf/d due to lack of export pipeline capacity. The field is capable of producing more gas than this, which results in frequent and widespread bottlenecked areas of high line pressure. This in turn causes numerous wells to log off of production, often requiring swab rigs to get them going again. Operating the field in this reactionary manner is very inefficient. The operator requests authorization to shut in wells strategically to alleviate this situation and utilize the resource more efficiently. A significant drop in production is not expected, as the field is constrained anyway. The subject well was selected on the basis of one or more of the following factors:

*Located in a bottlenecked area; *High intervention requirement relative to gas production, *High water production
Wells will be shut in for an indefinite period. As the constrained situation continues, different wells will be selected and subject wells will be returned to production in order to cycle the shut-ins around the field and allow well pressures to build up and assist with future production.

THE SUBJECT WELL LOCATION WAS RETURNED BACK TO PRODUCTION ON 11/22/2006 AT 12:00 PM

NAME (PLEASE PRINT) SHEILA UPCHEGO	TITLE SENIOR LAND ADMIN SPECIALIST
SIGNATURE 	DATE 11/29/2006

(This space for State use only)

RECEIVED

DEC 06 2006

DIV. OF OIL, GAS & MINING

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: ML-22265
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2. NAME OF OPERATOR: KERR-MCGEE OIL & GAS ONSHORE, L.P.		7. UNIT or CA AGREEMENT NAME:
3. ADDRESS OF OPERATOR: P.O. Box 173779 1099 18th Street, Suite 600, Denver, CO, 80217 3779		8. WELL NAME and NUMBER: MORGAN STATE 1-36
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2215 FNL 1876 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SENW Section: 36 Township: 09.0S Range: 21.0E Meridian: S		9. API NUMBER: 43047306000000
PHONE NUMBER: 720 929-6007 Ext		9. FIELD and POOL or WILDCAT: NATURAL BUTTES
COUNTY: UINTAH		STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input checked="" type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 11/3/2010			
<input type="checkbox"/> SPUD REPORT Date of Spud:			
<input type="checkbox"/> DRILLING REPORT Report Date:			

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.
 This well location returned to production on November 3, 2010 from a shut-in status.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY

NAME (PLEASE PRINT) Gina Becker	PHONE NUMBER 720 929-6086	TITLE Regulatory Analyst II
SIGNATURE N/A		DATE 11/17/2010

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: ML-22265
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3. ADDRESS OF OPERATOR: P.O. Box 173779 1099 18th Street, Suite 600, Denver, CO, 80217 3779		8. WELL NAME and NUMBER: MORGAN STATE 1-36
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2215 FNL 1876 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SENW Section: 36 Township: 09.0S Range: 21.0E Meridian: S		9. API NUMBER: 43047306000000
PHONE NUMBER: 720 929-6515 Ext		9. FIELD and POOL or WILDCAT: NATURAL BUTTES
COUNTY: UINTAH		STATE: UTAH
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input checked="" type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 5/25/2011	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER: <input style="width: 100px;" type="text"/>	
<input type="checkbox"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION	
<input type="checkbox"/> DRILLING REPORT Report Date:	<input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER: <input style="width: 100px;" type="text"/>	
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. THE SUBJECT WELL WAS RETURNED TO PRODUCTION ON 05/25/2011.		
Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY		
NAME (PLEASE PRINT) Sheila Wopsock	PHONE NUMBER 435 781-7024	TITLE Regulatory Analyst
SIGNATURE N/A	DATE 6/13/2011	

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9			
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10. FIELD and POOL or WILDCAT: NATURAL BUTTES		COUNTY: UINTAH			
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		STATE: UTAH			
TYPE OF SUBMISSION <input type="checkbox"/> NOTICE OF INTENT Approximate date work will start: <input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 11/2/2011 <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date:	TYPE OF ACTION <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input checked="" type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/> </td> </tr> </table>		<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input checked="" type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>
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12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. THE SUBJECT WELL WAS RETURNED BACK TO PRODUCTION ON 11/02/2011.					
Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY					
NAME (PLEASE PRINT) Sheila Wopsock	PHONE NUMBER 435 781-7024	TITLE Regulatory Analyst			
SIGNATURE N/A	DATE 12/6/2011				

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9			
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PHONE NUMBER: 720 929-6511		9. FIELD and POOL or WILDCAT: NATURAL BUTTES			
COUNTY: UINTAH		STATE: UTAH			
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
TYPE OF SUBMISSION	TYPE OF ACTION				
<input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 2/7/2012 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date:	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input checked="" type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/> </td> </tr> </table>		<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input checked="" type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>
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12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The operator requests authorization to temporarily abandon the subject well location. The operator proposes to temporarily abandon the well to drill the Morgan State 921-36F3 Pad, which consists of the following wells: Morgan State 921-36K1CS, Morgan State 921-36K1BS and Morgan State 921-36F4BS. Please see attached procedures.					
Approved by the Utah Division of Oil, Gas and Mining Date: February 09, 2012 By: <u><i>Derek Duff</i></u>					
NAME (PLEASE PRINT) Jaime Scharnowske		PHONE NUMBER 720 929-6304			
SIGNATURE N/A		TITLE Regulatory Analyst			
DATE 2/7/2012					

Well Name: **MORGAN STATE 1-36**
 Surface Location: SENW Sec. 36, T9S, R21E
 Uintah County, UT

1/27/12

API: 43043730600 LEASE#: ML-22265

ELEVATIONS: 5006' GL 5019' KB

TOTAL DEPTH: 9531' PBTD: 9511'

SURFACE CASING: 9 5/8", 36# H-40 @ 2487'

PRODUCTION CASING: 5 1/2", 17# K-55 @ 9511' - 4710'
 5 1/2", 15.5# K-55 @ 4710' - 0'

PRODUCTION TUBING: 2 3/8" J-55 @ 7902' (According to last slickline report, dated 5/12/11)

PERFORATIONS: WASATCH 5574' - 5680'
 MESAVERDE 6922' - 9372'

Tubular/Borehole	Drift inches	Collapse psi	Burst psi	Capacities		
				Gal./ft.	Cuft/ft.	Bbl./ft.
2.375" 4.7# J-55 tbq.	1.901	8100	7700	0.1624	0.02171	0.0039
5.5" 17# J-55	4.892	4910	5320	0.9764	0.1305	0.02324
5.5" 15.5# J/K-55	4.825	4040	4810	0.9997	0.1336	0.0238
9.625" 36# K-55	8.921	2020	3520	3.247	0.434	0.0773
Annular Capacities						
2.375" tbq. X 5 1/2" 17# csg				0.7013	0.0937	0.0167
2.375" tbq. X 5 1/2" 15.5# csg				0.7695	0.1028	0.01832
5.5" csg X 9 5/8" 36# csg				2.0128	0.2691	0.0479
5.5" csg X 7.875 borehole				1.4407	0.1926	0.0343
9 5/8" csg X 12 1/4" borehole				2.3436	0.3132	0.0558

GEOLOGICAL TOPS:

4618' Wasatch
 7288' Mesaverde

Recommended future action for disposition of well bore:

Temporarily abandon the wellbore during the drilling and completion operations of the **Morgan State 921-36F3** pad wells. Return to production as soon as possible once completions are done.

MORGAN STATE 1-36 TEMPORARY ABANDONMENT PROCEDURE

GENERAL

- H₂S MAY BE PRESENT. CHECK FOR H₂S AND TAKE APPROPRIATE PRECAUTIONS.
- CEMENT QUANTITIES BELOW ASSUME NEAT CLASS G, YIELD 1.145 CUFT./SX. IF A DIFFERENT PRODUCT IS USED, WELLSITE PERSONNEL ARE RESPONSIBLE FOR CORRECTING QUANTITIES TO YIELD THE STATED SLURRY VOLUME. WHEN SQUEEZING, INCLUDE 10% EXCESS PER 1000' OF DEPTH.
- TREATED FRESH WATER WILL BE PLACED BETWEEN ALL PLUGS INSTEAD OF BRINE.
- ALL DISPLACEMENT FLUID SHALL CONTAIN CORROSION INHIBITOR AND BIOCIDES. PREMIX 5 GALLONS PER 100 BBLS FLUID.
- NOTIFY UDOGM 24 HOURS BEFORE MOVING ON LOCATION.

PROCEDURE

Note: An estimated 35 sx Class "G" cement needed for procedure

1. MIRU. KILL WELL AS NEEDED. ND WH, NU AND TEST BOPE.
2. RU WIRELINE. ENSURE WELLBORE IS CLEAN. **A GPS READING WILL NEED TO BE TAKEN AT THE WELL SITE AND RECORDED IN OPENWELLS. PLEASE TAKE IT TO THE 6TH DECIMAL PLACE.**
3. **PLUG #1, ISOLATE MV/WAS PERFORATIONS (5574' - 9372'):** RIH W/ 5 ½" CBP. SET @ ~5520'. RELEASE CBP, PUH 10', BRK CIRC W/ FRESH WATER. PRESSURE TEST CASING TO 500 PSI. INFORM ENGINEERING IF IT DOESN'T TEST. DISPLACE A MINIMUM OF **11 SX/ 2.3 BBL/ 13.1 CUFT**. ON TOP OF PLUG. PUH ABOVE TOC (~5420'). REVERSE CIRCULATE W/ TREATED FRESH WATER.
4. **PLUG #2, PROTECT TOP OF WASATCH (4618'):** PUH TO ~4720'. BRK CIRC W/ FRESH WATER. DISPLACE A MINIMUM OF **24 SX / 4.9 BBL / 27.4 CUFT** AND BALANCE PLUG W/ TOC @ ~4510' (210' COVERAGE). PUH ABOVE TOC. REVERSE CIRCULATE W/ TREATED FRESH WATER.
5. LOWER WELLHEAD TO GROUND LEVEL TO ACCOMMODATE DRILLING OPS AND INSTALL MARKER PER UDOGM GUIDELINES.
6. RDMO. TURN OVER TO DRILLING OPERATIONS.

ALM 2/1/12

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: ML-22265
1. TYPE OF WELL Gas Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
2. NAME OF OPERATOR: KERR-MCGEE OIL & GAS ONSHORE, L.P.		7. UNIT or CA AGREEMENT NAME:
3. ADDRESS OF OPERATOR: P.O. Box 173779 1099 18th Street, Suite 600, Denver, CO, 80217 3779		8. WELL NAME and NUMBER: MORGAN STATE 1-36
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2215 FNL 1876 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SENW Section: 36 Township: 09.0S Range: 21.0E Meridian: S		9. API NUMBER: 43047306000000
PHONE NUMBER: 720 929-6511		9. FIELD and POOL or WILDCAT: NATURAL BUTTES
COUNTY: UINTAH		STATE: UTAH
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 4/10/2012	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	
<input type="checkbox"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input checked="" type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION	
<input type="checkbox"/> DRILLING REPORT Report Date:	OTHER: <input style="width: 100px;" type="text"/>	
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. The operator has concluded the temporary abandonment operations on the subject well location on 4/10/2012. This well was plugged in order to expand and drill the Morgan State 921-36F3 Pad wells. Please see the attached chronological well history for details. Thank you.		
Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY June 15, 2012		
NAME (PLEASE PRINT) Jaime Scharnowske	PHONE NUMBER 720 929-6304	TITLE Regulatory Analyst
SIGNATURE N/A	DATE 6/10/2012	

US ROCKIES REGION
Operation Summary Report

Well: MORGAN STATE 1-36					Spud Date:				
Project: UTAH-UINTAH				Site: MORGAN STATE 1-36				Rig Name No: MILES 2/2	
Event: ABANDONMENT				Start Date: 4/9/2012				End Date: 4/10/2012	
Active Datum: RKB @0.00usft (above Mean Sea Level)				UWI: MORGAN STATE 1-36					
Date	Time Start-End		Duration (hr)	Phase	Code	Sub Code	P/U	MD From (usft)	Operation
4/9/2012	7:00 - 17:00		10.00	ABANDT	30		P		7AM [DAY 1] JSA -- MOVING RIG & EQUIP, R/U RIG, POOH W/ TBG. MIRU, SPOT EQUIPMENT. WHP=300#. BLEW WELL DOWN. KILL W/ 20 BBLS TMAC. NDWH, NUBOP. R/U FLOOR & TBG EQUIPMENT. L/D HANGER. PMP 20 BBLS DN CSG. MIRU PRS. POOH, SCANNING (238) JTS 2-3/8" J-55 TBG. STOOD BACK 80 STDs, L/D 121 RED JTS- - (HVY SCALE & SEVERE PITTING) RDMO PRS. MIRU CUTTERS. RIH W/ 5.5" GAUGE RING TO 5535'. POOH W/ GAUGE RING. RIH W/ HLBRTN 5.5" CBP & SET @ 5520'. RDMO CUTTERS. 5PM SWI-SDFN PRESSURE TESTING
4/10/2012	7:00 - 7:30		0.50	ABANDP	48		P		PRESSURE TESTING
	7:30 - 7:30		0.00	ABANDP	51		P		TIH TBG TO 5520, TAG PLUG, LAY DWN 1 JT, 168 JTS, BREAK CIRC, PRESSURE TEST TO 500# TEST GOOD, RU SUPERIOR, SET 2 CEMENT PLUGS AT 5505' AND 4730', ALL CEMENT IS CLASS G, YIELD 1.145, 4.9 GWTR/SX, 15.8# DENISTY, PLUG 1, PUMP 2.6 BBLS FRESH, 15 SX, 3 BBLS, DISPLACE WITH 1 BBL FRESH , 19.8 BBLS T-MAC, 2ND PLUG, 5 BBLS FRESH, 30SX, 6.1 BBLS CEMENT, DISPLACE WITH 2.6 BBLS FRESH, 14.5 BBLS TREATED T-MAC POOH LAY DWN TBG, ND BOP'S, CAP WELL, RDMO TO NBU 636-12E n 39 degrees 59' 36.9" w 109 degrees 30' 10.0" elev 5060'